STIC Search Report
EIC 3600

Scientific and Technical Information Center

To: Examiner Mark Fleischer
Location: KNX5A64
Art Unit: 3624
Date: 06/30/09
Case Serial Number: 10/748730

From: Matthew Hogan
Location: EIC3600
KNX 4B71
Phone: (571) 272-6674
Matthew.Hogan@uspto.gov

Search Notes

Dear Examiner FLEISCHER:

Please find attached the results of your requested search for the above-referenced case. The search was conducted in Dialog, EBSCOhost (I & PC Abs.), STN MechEng, and ProQuest (Fin. Times),

I have suggested *potential* references of interest in the first part of the search results. However, please be sure to review the entire report. There may be additional references that you find useful.

Please note that the results, after the potential references of interest, proceed through an Inventor search (which is provided without regard to priority date and in GREEN TEXT) and then to results in both Abstract and Full Text databases (which are more directly screened for priority date).

If you have any questions about the search, or need a refocus, please do not hesitate to contact me.

Thank you for using the EIC, and we look forward to your next search!

I. Potential References of Interest

12/3,K/34 (Item 2 from file: 444)
DIALOG(R)File 444: New England Journal of Med.
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00102941
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Decreasing Risk Of Leukemia With Prolonged Follow-up After Chemotherapy And Radiotherapy For Hodgkin's Disease (Original Article)
Blayney, Douglas W.; Longo, Dan L.; Young, Robert C.; Greene, Mark H.; Hubbard, Susan M., R.N.; Postal, Marcia G., R.N., M.S.; Duffey, Patricia L., R.N.; DeVita, Vincent T., Jr.
The New England Journal of Medicine
March 19 , 1987 ; 316 (12),pp 710-714
Line Count: 00336   **Word Count:** 04639

Text:
...events occurred at the same time after the start of observation. An estimated risk function was computed, expressing the risk of an event per total **person**-years of **observation** during each interval. The estimated **value** of the **risk** function was used in a multiple linear regression analysis. The natural logarithm of the estimated risk was selected as the dependent variable, and time and...

14/3,K/4 (Item 1 from file: 148)
DIALOG(R)File 148: Gale Group Trade & Industry DB
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15979263   **Supplier Number:** 103731431 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Length of stay, conditional length of stay, and prolonged stay in pediatric asthma. (Access in Chronic Care).(a study finds the overall management of asthma admissions appears more efficient in Pennsylvania than in New York)(Illustration)

Silber, Jeffrey H.; Rosenbaum, Paul R.; Even-Shoshan, Orit; Shabbout, Mayadah; Zhang, Xuemei; Bradlow, Eric T.; Marsh, Roger R.
Health Services Research , 38 , 3 , 867(20)
June , 2003
Document Type: Illustration
ISSN: 0017-9124
Language: English
Record Type: Fulltext; Abstract
Word Count: 07080   **Line Count:** 00725
...stay" (CLOS)) (Silber et al. 1999b), this report aims to provide insight

into state, city, and hospital differences in the patterns of stay for
asthma **patients.** Through this approach, we aim to aid policymakers
to better understand some potential etiologies for these differences, so
that future policy initiatives can better focus on likely avenues for
successful interventions.
    METHODS
    Patient Population
    We obtained claims data on all pediatric admissions ages 1-17 in
Pennsylvania for the period 1/1/96-12/31/98 and in New York State for the
period 1/1/96-9/30/98. **Patients** admitted to psychiatric and nonacute
care hospitals were not included in this study. Data from Pennsylvania were
provided through the Pennsylvania Health Care Cost Containment...

14522954 **Biosis No.:** 199800317201
**Evaluation of mortality factors and risk analysis for the design of an integrated pest
management system**

Author: Roux Olivier (Reprint); Baumgartner Johann
Author Address: Swiss Federal Office Agriculture, Mattenhofstr. 5, CH-3003 Bern,
Switzerland**Switzerland

Abstract: A probabilistic approach of survival analysis based on the theory of competing risks
was applied to the potato tuber moth Phthorimaea operculella (Zeller) affecting tubers in
Tunisian rustic stores. Exponential curve of death. i.e., constant force of mortality functions
were used in a case study on a cohort time basis. The additive property of crude cause-
specific forces of mortality is used to combine mortality factors. which permits to judge different
control strategies. In an integrated pest management perspective, the effect of basic
mortalities, i.e., innate and dispersal related mortalities is recombined with native natural
enemies. Thereafter, we calculate the force of additional compatible control factors needed to
reduce the proportion of infested tubers below an economically relevant level. Control
strategies based on native natural enemies are shown to have variable effects which put
farmers at economic risks. The general importance of integrating compatible control factors is
recognized in the evaluation of virus applications. Based on risk analyses. Tunisian potto
growers were recommended, in the case of standard initial infestations of five eggs per tuber,

to use virus preparations at a higher dosage than the 0.0015 larval equivalent kg as used in this study. Moreover, the study confirms the general importance of entering potatoes with low infestation levels into rustic shelters. This considerably decreases the risk of exceeding the economic threshold and make virus based control efficient even at low dosages. If the initial infestation considerably exceeds five eggs per tuber, the integration of a compatible control factor becomes more difficult. Nevertheless, even in absence of additional control factors the infestation of tubers does not exceed 50%.

DESCRIPTORS:
Major Concepts: Mathematical Biology--Computational Biology; Pest Assessment Control and Management
Biosystematic Names: Lepidoptera--Insecta, Arthropoda, Invertebrata, Animalia; Solanaceae-- Dicotyledones, Angiospermae, Spermatophyta, Plantae
Organisms: Phthorimaea-operculella {potato tuber moth} (Lepidoptera)--storage pest; potato
Common Taxonomic Terms: Animals; Arthropods; Insects; Invertebrates; Angiosperms; Dicots; Plants; Spermatophytes; Vascular Plants
 Geographical Name: Tunisia (Palearctic region)
 Miscellaneous Terms: Concept Codes: competing risks; economics; hazard rate functions; integrated pest management; mortality factors; survival analysis
Concept Codes:
60015 Economic entomology - Integrated control
 05500 Social biology and human ecology
 12510 Pathology - Necrosis
 54600 Pest control: general, pesticides and herbicides
 60008 Economic entomology - Stored products
 64076 Invertebrata: comparative, experimental morphology, physiology and pathology - Insecta: physiology
Biosystematic Codes:
75330 Lepidoptera
 26775 Solanaceae

Abstract: ...affecting tubers in Tunisian rustic stores. Exponential curve of death. i.e., constant force of mortality functions were used in a case study on a **cohort time** basis. The additive property of crude cause-specific forces of mortality is used to combine mortality factors. which permits to judge different control strategies. In...

10/5,K/1 (Item 1 from file: 5)
DIALOG(R)File 5: Biosis Previews(R)

14377618   **Biosis No.:** 199800171865
Cost-identification analysis in oral cavity cancer management

Author: Funk Gerry F (Reprint); Hoffman Henry T; Karnell Lucy Hynds; Ricks Joan M; Zimmerman M Bridget; Corbae Dean P; Hussey David H; McCulloch Timothy M; Graham Scott M; Dawson Cindy J; Means Mary E; Colwill Margaret L; Titler Marita G; Smith Elaine M

Author Address: Dep. Otolaryngol.-Head Neck Surg., 200 Hawkins Dr., Room E230GH, Univ. Iowa Hosp. Clin., Iowa City, IA 52242, USA**USA

Abstract: The objectives of this study were to investigate potential relationships between pretreatment patient-mix characteristics, treatment modalities, and costs generated during the pretreatment work-up, treatment, and 1-year follow-up periods for patients with oral cavity cancer (OCC). Another objective was to identity potential areas for cost reduction and improved **resource allocation** in the **management** of OCC patients. Using a **retrospective cohort** of 73 patients with OCC, pretreatment patient-mix characteristics and treatment modalities were evaluated in relation to university-based charges incurred during the pretreatment evaluation, treatment, and 1-year follow-up periods. Simple regression and stepwise multiple regression analyses were used to develop predictive models for cost based on independent variables, including age, AJCC TNM clinical stage, smoking history, American Society of Anesthesiologists (ASA) class, comorbidity as defined by the Kaplan-Feinstein grade and treatment modality. The dependent measurements included all physician, office, and hospital charges incurred at the University of Iowa Hospitals and Clinics during the pretreatment evaluation, treatment, and follow-up periods, as well as the total pretreatment through 1-year follow-up management costs. Independent variables that were identified as being significantly associated with treatment costs included T classification, N classification, TNM stage, unimodality versus multimodality treatment, and the Kaplan-Feinstein comorbidity grade. Age, smoking status, and ASA class were not significantly associated with costs. The majority of the OCC management costs were incurred during the treatment period. The most substantial decreases in management costs for OCC will be realized through measures that allow identification and treatment of disease at an early stage, in which single-modality treatment may effectively be used. Resource allocation for OCC should support the investigation of measures through which the diagnosis and treatment of OCC at the earliest possible stage is facilitated. The presence of comorbid illness is a significant component in the determination of management costs for OCC and should be included in analyses of resource allocation for OCC. The singular diagnosis of OCC encompasses a wide range of patient illness severity, and diagnosis-related reimbursement schemes for OCC treatment should optimally differentiate between early and advanced stage disease.

DESCRIPTORS:
Major Concepts: Dental Medicine--Human Medicine, Medical Sciences; Oncology--Human Medicine, Medical Sciences; Public Health--Allied Medical Sciences
Biosystematic Names: Hominidae--Primates, Mammalia, Vertebrata, Chordata, Animalia
Organisms: human (Hominidae)--patient
Common Taxonomic Terms: Animals; Chordates; Humans; Mammals; Primates; Vertebrates
Diseases: oral cavity cancer
Mesh Terms: Mouth Neoplasms (MeSH)
 Miscellaneous Terms: Concept Codes: cost reduction; diagnosis-related reimbursement scheme; illness severity; pretreatment patient-mix characteristics; resource allocation
Concept Codes:

37010 Public health - Public health administration and statistics
 12504 Pathology - Diagnostic
 19006 Dental - Pathology
 24004 Neoplasms - Pathology, clinical aspects and systemic effects
 37012 Public health - Health services and medical care
Biosystematic Codes:
86215 Hominidae

Abstract: ...and 1-year follow-up periods for patients with oral cavity cancer (OCC). Another objective was to identity potential areas for cost reduction and improved **resource allocation** in the **management** of OCC patients. Using a **retrospective cohort** of 73 patients with OCC, pretreatment patient-mix characteristics and treatment modalities were evaluated in relation to university-based charges incurred during the pretreatment evaluation...

II. Inventor Search

A. Dialog

File 347:JAPIO Dec 1976-2009/Jan(Updated 090503)
　　(c) 2009 JPO & JAPIO
File 348:EUROPEAN PATENTS 1978-200926
　　(c) 2009 European Patent Office
File 349:PCT FULLTEXT 1979-2009/UB=20090618|UT=20090611
　　(c) 2009 WIPO/Thomson
File 350:Derwent WPIX 1963-2009/UD=200939
　　(c) 2009 Thomson Reuters

```
Set    Items   Description
S1      978    AU=(WILSON, T? OR WILSON T?)
S2        4    S1 AND COHORT?
S3        4    IDPAT (sorted in duplicate/non-duplicate order)
```

2/3K/1 (Item 1 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00975224

METHOD AND SYSTEM FOR ANALYZING RESOURCE ALLOCATION
PROCEDE ET SYSTEME D'ANALYSE D'AFFECTATION DE RESSOURCES

Patent Applicant/Inventor:

- **WILSON Thomas W**
  809 Almahurst Lane, Loveland, OH 45140; US; US(Residence); US(Nationality);
- **WILSON Thomas W...**
  : ; ; ;

Legal Representative:

- **SMITH Mark F(agent)**
  7577 Central Park Boulevard, Suite 316, Mason, OH 45040; US;

	Country	Number	Kind	Date
Patent	WO	200305162	A2-A3	20030116
Application	WO	2002US21225		20020702
Priorities	US	2001302430		20010702
	US	2002358284		20020220
	US	2002362146		20020306

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; BG; CH; CY; CZ; DE; DK; EE; ES;
FI; FR; GB; GR; IE; IT; LU; MC; NL; PT;
SE; SK; TR;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GQ; GW;
ML; MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; MZ; SD; SL; SZ; TZ;
UG; ZM; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;

Language Publication Language: English
Filing Language: English
Fulltext word count: 11948

English Abstract:

...per a unique unit of analysis (e.g. UOA-ID) that meets the criteria for inclusion into a specific
Population (Type) into information organized by **Cohort** Time and summarized across all UOA-Ids that
are part of the same Population. An Eligible Adjusted Variable Value (EAV) can be calculated for each
time segment and summarized across all the UOA-IDs to enable one to estimate resources that can be
allocated per UOA-ID per **Cohort** time segment to reach a defined outcome based on a defined return
on resource allocation estimate.

French Abstract:

...analyse (telle que UOA-ID) conforme aux criteres d'appartenance dans une population specifique
(Type) et on aboutit a des informations organisees par temps de **cohorte** et qui sont recapitulees pour
l'ensemble des UOA-appartenant a cette meme population. Une valeur de variable EAV peut etre
calculee pour chaque segment... ...recapitulee pour l'ensemble des UOA-ID pour permettre de calculer
les ressources susceptibles d'etre affectees par UOA-ID par segment de temps de **cohorte** pour obtenir
une issue definie sur la base d'un retour defini sur affection de ressource estimee.

Detailed Description:

...business organization will be better able to analyze and evaluate the resources that will be necessary to achieve a specific outcome by first understanding this "**Cohort** Time" heterogeneity of any population during any calendar (or clock) time period.

By way of illustration, manufactures, such as automobile manufactures, are actively searching for...generating an Output Expression.

In another preferred embodiment of the invention the method further comprises the step of transforming the Output Expression from expressed in **Cohort** time segments to being expressed in CCT segments.

1 0 In another embodiment of the invention the method for analyzing resource allocation is performed using...Grouper can be equivalent to type, in that case it is a many-to-few algorithm); identi@@ing a Start Time; forming at least one **Cohort** time segment based on the Start Time; adjusting and standardizing the I ...invention is an Output Expression for use in analyzing resource allocation comprising a representation showing trends of a particular Population, said trends are expressed in **Cohort** time segments.

In another preferred embodiment of the invention, an Output Expression is generated by the method comprising the stop of calculating an Eligible Adjusted...more desirable in certain studies to use a calendar month, regardless of its duration, as a definition of a time segment. In that case, some **cohort** months
TABLE 4
STEP 6: FORM TIME SEGMENTS FOR EACH UOA4D (PROSPECTIVE + AND RETROSPECTIVE), BASED ON START TIME.

UOA-ID Type Start Time Grouper TS...information databank forthe appropriate time segment, as represented by Table 5. In this way, VAR Values are changed from being tracked by calendar time to **Cohort** Time. As used herein "**Cohort** Time" means that the Start Time is based on a defining event, which is the last date/clock time that the individual UOA-ID meets all of the eligibility criteria to be included into the population. Thus, in **Cohort** Time, the start of TS+I (Index month) will be the date or time all of the eligibility criteria is met per UOMD, not the In a monthbased **Cohort** Time, the first individual first month would be January I - 31, 2001, and the second individual's first month would be December I · 31, 2001. Thus, in **Cohort** Tmie, however, both individuals would be counted in month 1, however, in months 2 to 12, the first individual would be counted while the second...also the first day of the study, a study which operationally ended December 31, 2001'. Accordingly, the individual's prospective Potential Eligibility Score is 12 **Cohort** months out of a possible 12 **Cohort** months (equivalent in this case to the 12 calendar months of the study). However, the individual's retrospective Potential Eligibility Score is based upon zero (0) retrospective **Cohort** months out of a possible 12 retrospective **Cohort** months (this score is 12 because any UOA-ID, could have "started" on December 31, 2001 and would therefore would be a maximum or potential...divided by 12, which will default to zero by the algorithm). The I 0 second individual who "started" on December 1, 2001 has one prospective **Cohort** month out of a possible 12 **Cohort** months of prospective eligibility so the individual's prospective Potential Eligibility Score is a function of I out of 12 (e.g. I divided by...time (CCT). Coupled with eligibility to experience a transaction, the method and system for utilizing the method of the present invention transforms these data into **Cohort** time trends of utilization (e.g. cost) per Type. These trends are then used to 1) better understand current trends in **Cohort** Time, and 2) to

better estimate resource allocation to meet specific, goals of improving utilization over **Cohort** Time or CCT.

For this example, the UOAs are specific patients within a defined Population and the UOA-ID is a unique individual who meets...and the system of the present invention uses an individual view of an individual advertisement (Type) and transforms this into a trend of viewship over **Cohort** Time per Type (or Grouper) in the population. These trends can be used to understand the current time segment "view" per advertisement (comparisons to ...this case the VAR
Value is multiplied by eligibility value to generate an EAV.

Generate an Output Expression(s)
Display trends in "percent selected" over **Cohort** time segments
without regard to stratifying variable (Product).

Calculated trend of population "selecting" product A (trademark
12 owners product) vs. Product B (infringing product) per... here
**NNT is based bn the rounded value as an integer.

It should now be apparent that with all of the various Output Expressions, the **Cohort** Time trend calculated per group (or sub-group) can be compared to other groups (or subgroups). This can be based on Type or another variable...stratify by this variable, calculating trends, and RA, 0, and RORA.

It should be now be apparent to those skilled in the art that these **Cohort** Time cJqculavions can be easily translated back into CCT for financial budgeting and reporting. This can be accomplished by inclusion of the "Start Time" CCT into data set per UOA-ID by Type/Grouper. That is, using the resources allocation estimates per **cohort** time segment, these time segment specific estimates can be place back into CCT to estimate resources allocated per CCT time segment. This is accomplished by maintaining the start CCT per UOA-ID in the set of information. See Table 25 for example the simple method of transforming **Cohort** Time values for budgeting per calendar time.

I 0 TABLE 26
Distribution per DV=I DV=O Total RA
Calendar Time (expected (expected (expected ESTIMATE
Segment (equal in percentage) percentage) percentage) S (per UOA
duration to **Cohort** ID)*
TS)
TS+1 (index TS) 37.6% 62.4% 100.0 $255
TS+2 8.4 91.6 100.0 $47
TS+3 8...0 $36
TS+6 3.1 96.9 100.0 $23
Column Sum/ 69.99% / 6 529.99% / 6 600 / 6 $456 / 6
Number of **Cohort**
Time Segment
Budget Estimates 11.67 % 88.33 % 100.0 % $76
(ColuinnAverage)
Key to table: *Resource Allocation (RA) Estimates (where Outcome expectation 1 0% and Return on

Resource Allocation = 1.0) The calculations are based on a equal weighting of 1 5 UOA-ID per **Cohort** time segment. Thus (1 00 / 6 or 16.66%) of the total Population during any calendar time segment is in any of the six **Cohort** Time segments. A simple weighting system can be applied to alter the column average.

Further, it should also now be apparent to those skilled in meets the criteria for inclusion into a specific Population (Type or Grouper) into information organized by **Cohort** Time and summarized across all UOA-IDs that are part of the same Population. This is accomplished by determining the time segment and its duration...EAV. The EAVs can be summarized across all the UOA-IDs to enable one to estimate resources that can be allocated per UOA-ID per **Cohort** time segment to reach a defined outcome based on a defined return on resource allocation estimate.

It has been found and should be understood to...

Claims:

...UOA-ID, a CCT, and a VAR Value;
grouping each UOA-ID into an appropriate Type;identit@ing a Start Time;forming at least one <B>Cohort</B> time segment based on the Start Time;placing the UOA-ID into the appropriate time segment;I 0 calculating an eligibility score for each UOA step oftransforming the Output 1 5 Expression from expressed in <B>Cohort</B> time segments to being expressed in CCT segments.
3 The method of Claim 1 wherein said method is performed using a system comprising a central...UOA-11); andgenerating an Output Expression.
17 The method of Claim 16 ffirther comprising the step of transforming the Output Expression from expressed in <B>Cohort</B> time segments to beingexpressed in CCT segments.
18 The method of Claim 16 wherein said method is performed using a system comprising a central... an UOA-ID, a CCT, and a VAR Value;
grouping each UOA-ID into an appropriate Type;identifying a Start Time;forming at least one <B>Cohort</B> Time segment based on the Start Time;placing the VAR Value into the appropriate time segment;I 0 calculating an eligibility score for each UOA...infringement applications, and health care applications.
36 An Output Expression comprising a representation showing EAV trends of a particular Population, said trends are expressed in **Cohort** time segments.

37 An Output Expression comprising a representation showing NNT trends of a particular Population, said trends are expressed in **Cohort** time segments.

38 An Output Expression comprising a representation showing EAV Net Value trends of a particular Population, said trends are expressed in **Cohort** time segments.

0013042041 *Drawing available*
WPI Acc no: 2003-121329/200311
XRPX Acc No: N2003-096588
Analyzing method for resource allocation to achieve specified outcomes transforming economic and eligibility information produced over calendar/clock time per a unique unit of analysis
Patent Assignee: WILSON T W (WILS-I)
Inventor: **WILSON T W**

Patent Family (4 patents, 99 countries)							
Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
WO 2003005162	A2	20030116	WO 2002US21225	A	20020702	200311	B
EP 1425681	A2	20040609	EP 2002749796	A	20020702	200438	E
			WO 2002US21225	A	20020702		
AU 2002320286	A1	20030121	AU 2002320286	A	20020702	200452	E
AU 2002320286	A8	20051013	AU 2002320286	A	20020702	200616	E

Priority Applications (no., kind, date): US 2001302430 P 20010702; US 2002358284 P 20020220; US 2002362146 P 20030306

Patent Details					
Patent Number	Kind	Lan	Pgs	Draw	Filing Notes
WO 2003005162	A2	EN	57	6	
National Designated States,Original					AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SI SK SL TJ TM TN TR TT TZ UA UG US UZ VN YU ZA ZM ZW
Regional Designated States,Original					AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ NL OA PT SD SE SK SL SZ TR TZ UG ZM ZW
EP 1425681	A2	EN			PCT Application
					Based on OPI patent
Regional					AL AT BE BG CH CY CZ DE DK EE ES FI FR GB GR IE IT LI LT LU LV MC

Designated States,Original	MK NL PT RO SE SI SK TR					
AU 2002320286	A1	EN			Based on OPI patent	WO 2003005162
AU 2002320286	A8	EN			Based on OPI patent	WO 2003005162

Inventor: **WILSON T W Alerting Abstract** ...UOA-ID, a CT and a VAR value. Each UOA-ID is grouped into an appropriate Type. A Start Time is identified. At least one **Cohort** time segment is formed based on the Start Time. The UOA-ID is placed into the appropriate time segment. An eligibility score is calculated for... Original Publication Data by AuthorityArgentina**Publication No.** Inventor name & address:**WILSON T W**... ...**WILSON T W**... ...**Wilson, Thomas W**... ...**WILSON, Thomas, W** ...**Original Abstracts:**per a unique unit of analysis (e.g. UOA-ID) that meets the criteria for inclusion into a specific Population (Type) into information organized by **Cohort** Time and summarized **across** all UOA-Ids that are part of the same Population. An Eligible Adjusted Variable Value (EAV) can be calculated for each time segment and summarized across all the UOA-IDs to enable one to estimate resources that can be allocated per UOA-ID per **Cohort** time segment to **reach** a defined outcome based on a defined return on resource allocation estimate... ... per a unique unit of analysis (e.g. UOA-ID) that meets the criteria for inclusion into a specific Population (Type) into information organized by **Cohort** Time and summarized across all UOA-Ids that **are** part of the same Population. An Eligible Adjusted Variable Value (EAV) can be calculated for each time segment and summarized across all the UOA-IDs to enable one to estimate resources that can be allocated per UOA-ID per **Cohort** time segment to reach a defined outcome based **on** a defined return on resource allocation estimate... ...

File 149:TGG Health&Wellness DB(SM) 1976-2009/May W4
  (c) 2009 Gale/Cengage
File 444:New England Journal of Med. 1985-2009/Jun W3
  (c) 2009 Mass. Med. Soc.
File 15:ABI/Inform(R) 1971-2009/Jun 24
  (c) 2009 ProQuest Info&Learning
File 9:Business & Industry(R) Jul/1994-2009/Jun 24
  (c) 2009 Gale/Cengage
File 610:Business Wire 1999-2009/Jun 25
  (c) 2009 Business Wire.
File 810:Business Wire 1986-1999/Feb 28
  (c) 1999 Business Wire
File 275:Gale Group Computer DB(TM) 1983-2009/May 28
  (c) 2009 Gale/Cengage
File 624:McGraw-Hill Publications 1985-2009/Jun 25
  (c) 2009 McGraw-Hill Co. Inc
File 621:Gale Group New Prod.Annou.(R) 1985-2009/May 20
  (c) 2009 Gale/Cengage
File 636:Gale Group Newsletter DB(TM) 1987-2009/Jun 03

(c) 2009 Gale/Cengage
File 613:PR Newswire 1999-2009/Jun 24
   (c) 2009 PR Newswire Association Inc
File 813:PR Newswire 1987-1999/Apr 30
   (c) 1999 PR Newswire Association Inc
File 16:Gale Group PROMT(R) 1990-2009/Jun 03
   (c) 2009 Gale/Cengage
File 160:Gale Group PROMT(R) 1972-1989
   (c) 1999 The Gale Group
File 634:San Jose Mercury Jun 1985-2009/Jun 24
   (c) 2009 San Jose Mercury News
File 148:Gale Group Trade & Industry DB 1976-2009/Jun 10
   (c) 2009 Gale/Cengage
File 20:Dialog Global Reporter 1997-2009/Jun 25
   (c) 2009 Dialog
File 65:Inside Conferences 1993-2009/Jun 25
   (c) 2009 BLDSC all rts. reserv.
File   2:INSPEC 1898-2009/Jun W2
   (c) 2009 The IET
File 474:New York Times Abs 1969-2009/Jun 25
   (c) 2009 The New York Times
File 475:Wall Street Journal Abs 1973-2009/Jun 25
   (c) 2009 The New York Times
File 99:Wilson Appl. Sci & Tech Abs 1983-2009/May
   (c) 2009 The HW Wilson Co.
File 256:TecInfoSource 82-2009/May
   (c)2009Info.Sources Inc.All rights reserved
File   8:Ei Compendex(R) 1884-2009/Jun W2
   (c) 2009 Elsevier Eng. Info. Inc.
File   6:NTIS 1964-2009/Jun W4
   (c) 2009 NTIS, Intl Cpyrght All Rights Res
File 34:SciSearch(R) Cited Ref Sci 1990-2009/Jun W2
   (c) 2009 The Thomson Corp
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
   (c) 2006 The Thomson Corp
File   7:Social SciSearch(R) 1972-2009/Jun W3
   (c) 2009 The Thomson Corp
File   5:Biosis Previews(R) 1926-2009/Jun W3
   (c) 2009 The Thomson Corporation
File 73:EMBASE 1974-2009/Jun 23
   (c) 2009 Elsevier B.V.
File 155:MEDLINE(R) 1950-2009/Jun 24
   (c) format only 2009 Dialog

Set   Items   Description
S1   1/489   AU=(WILSON, T? OR WILSON T?)

```
S2        189    S1 AND COHORT
S3          0    S2 AND (RESOURCE?(2N)ALLOCAT?)
S4         29    S1 AND COHORTS
S5         11    RD (unique items)
S6          0    S5 AND RESOURCE?
S7          1    S5 AND ALLOCAT?
```

5/3,K/6 (Item 3 from file: 34)
DIALOG(R)File 34: SciSearch(R) Cited Ref Sci

16656086 **Genuine Article#:** 184DA **No. References:** 16
Atenolol as initial antihypertensive therapy: an observational study comparing first-line agents

Author: Blackburn DF (REPRINT) ; Lamb DA; Eurich DT; Johnson JA; **Wilson TW**; Dobson RT;
Blackburn JL
Corporate Source: Univ Saskatchewan,Coll Pharm & Nutr,110 Sci Pl/Saskatoon/SK S7N 5C9/Canada/
(REPRINT); Univ Saskatchewan,Coll Pharm & Nutr,Saskatoon/SK S7N 5C9/Canada/: Univ
Saskatchewan,Coll Pharm & Nutr,Saskatoon/SK/Canada/; Univ Saskatchewan,Coll
Med,Saskatoon/SK/Canada/; Univ Alberta,Inst Hlth Econ, Dept Publ Hlth Sci,Edmonton/AB/Canada/
Author: Blackburn DF (REPRINT) ; Lamb DA; Eurich DT; Johnson JA; **Wilson TW**; Dobson RT;
Blackburn JL
Abstract: ...of Saskatchewan, Canada. Eligible subjects were first-ever users of antihypertensive
medications between 1 January 1994 and 31 December 2003 and were grouped into four **cohorts:**
atenolol, angiotensin-converting enzyme inhibitors (ACEI), thiazide diuretics, or calcium antagonists.
Patients remained eligible during monotherapy only.

Results We identified 19 249 eligible individuals (mean... ...a mean of 2.3 years (SD 2.0). The rate
of myocardial infarction, unstable angina, stroke, or death occurred in similar frequencies among all
cohorts: atenolol (2.3%), ACEI (3.6%), thiazide diuretics (2.9%), and calcium antagonists (3.9%). After
adjustment for potential confounders, atenolol therapy was not associated... ...hazard ratios ranging
between 1.03 [95% confidence intervals (CI) 0.72-1.46] and 1.24 (95% CI 0.91-1.68) for all **cohorts**
compared with atenolol. Similar results were observed upon stratifying the sample into subjects above
and below 60 years of age.

Conclusion The low event rates for all **cohorts** suggest that atenolol has not been associated with a
significant burden of cardiovascular morbidity or mortality in its traditional role for uncomplicated
hypertension. Further study...
Identifiers--

01477153   **Supplier Number:** 15139791 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Childhood and adult socioeconomic status as predictors of mortality in Finland.

Lynch, John W.; Kaplan, George A.; Cohen, Richard D.; Kauhanen, Jussi; **Wilson, Thomas W.**; Smith, Nicholas L.; Salonen, Jukka T.
The Lancet , v343 , n8896 , p524(4)
Feb 26 ,
1994
 Publication Format: Magazine/Journal
ISSN: 0099-5355
Language: English
Record Type: Fulltext; Abstract **Target Audience:** Professional
Word Count: 3047   **Line Count:** 00255
...**Wilson, Thomas W**

...socioeconomic conditions in childhood are important factors in adult
health. We caution against this interpretation. Firstly, these results
largely reflect the mortality experience of study **cohorts** aged 54
and 60 years; with the relatively short follow-up, only 13 of the 166
deaths occurred in the **cohorts** aged 42 or 48. Furthermore, as the
54-year-old cohort accounted for almost 60% of the sample, it is worth
noting that this group...

A. Full-Text Databases – PATENT

File 348:EUROPEAN PATENTS 1978-200926
(c) 2009 European Patent Office
File 349:PCT FULLTEXT 1979-2009/UB=20090625|UT=20090618
(c) 2009 WIPO/Thomson

```
      Set     Items    Description
      S1      113518   (ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT? OR
DEVOT? OR DIVID?()UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?)(3N)(RESOURC? OR
CAPITAL OR AVAILABLE()MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET?
OR DEVELOPMENT) OR (VALUE? ?(2W)RISK OR VAR)

      S2      14529    (EFFECTIV? OR SUCCESS? OR UTILITY OR USEFUL? OR VALUE OR
WORTH? OR BENEFI? OR ADVANTAGE? OR GAIN? ?) (4N)(INTERVENTION? OR TREATMENT? OR
DIAGNOS? OR THERAP? OR HEALTCARE OR SURGER? OR SURGICAL OR DRUG OR PHARMACEUT? OR
FIX? OR CURE? OR REPAIR? OR REPAR? OR CORRECTION? OR CORRECTIV?)

      S3          7    COHORT()TIME OR RETROSPECT?()COHORT?
      S4          0    S3 NOT AY=2003
      S5       5518    (UNIT? ? OR MEMBER? ? OR DATAPOINT? OR DATA()POINT? OR ENTITY
OR ENTITIES OR INDIVIDUAL? ? OR PERSON? ? OR SUBJECT? ? OR PATIENT? ?)
(2N)(POPULATION OR SAMPLE? OR OBSERVED OR OBSERVATION OR TO()OBSERV? OR TESTING OR
TRIAL? OR STUDY OR STUDIES OR PATIENTS? ? OR COHORT? ? OR ANALYSIS)

      S6   2485   (PROSPECTIV? OR RETROSPECTIV? OR TIME? ? OR AFTER OR
                  FOLLOWING OR SUBSEQUENT()TO OR SINCE OR START?()("FROM"
                  OR WITH))(4N)(DIAGNOS? OR PROGNOS? OR FAIL? OR DEFECT? OR
                  (CONDITION OR STATUS OR TYPE OR CATEGOR???)(2N)(DEFIN? OR
                  DETERMIN? OR ASCERTAIN? OR LABEL? OR DESIGNAT? OR
                  ARRIV?()AT OR ASSIGN?))

      S7      3222    (PERIOD? ? OR YEAR? ? OR ERA OR ERAS OR HISTOR? OR
TIME()(SEGMENT? OR RANGE?) OR TIMES OR DURATION OR DURING(2N)TERM OR LONG()(TERM OR
RANGE) )(4N)(AUTHORIZ? OR USE OR USAGE OR AVAILABL? OR (IN OR ON OR
POST)(2W)(MARKET? OR CIRCULATION) OR PRESCRIBAB? OR MARKETING OR USING OR
MARKETPLACE)

      S8      5323      (DURATION OR TIME? OR PERIOD? OR (AFTER OR
                  "FROM")(2W)(START? OR COMMENC?) OR FOLLOWING OR
                  SUBSEQUENT()TO OR SINCE OR PROSPECTIV? OR RETROSPECTIV?
                  OR WINDOW?)(4N)(TREATMENT? OR INTERVENTION? OR THERAP? OR
                  REPAIR? OR CORRECTION? OR CORRECTIV? OR ADMINISTRATION?)

      S9       502   S8 AND S7 AND S6 AND S5
      S10      101   S9(12N)S1
      S11       60   S10 NOT AY>2003
      S12       60   IDPAT (sorted in duplicate/non-duplicate order)
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S13      60  IDPAT (primary/non-duplicate records only)
S14   10  S13(24N)S2
```

14/3K/7 (Item 6 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00756315

DATA PROCESSING SYSTEM FOR PATIENT OUTCOME AND RISK BENCHMARKING AND HEALTHCARE DATA BASE MANAGEMENT
SYSTEME DE TRAITEMENT DE DONNEES POUR L'ESTIMATION DES RISQUES ENCOURUS PAR UN PATIENT ET DES RESULTATS PROBABLES CHEZ CE PATIENT ET POUR LA GESTION D'UNE BASE DE DONNEES DE SANTE

Patent Applicant/Patent Assignee:

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  (For all designated states except: US)
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  (Designated only for: US)
- **PETTIT Krista**; 61 East 86th Street, Apt. 31, New York, NY 10028
  US; US(Residence); US(Nationality)
  (Designated only for: US)
- **HARJONO Harry**; 128 Glenwood Court, Union, NJ 07083
  US; US(Residence); US(Nationality)
  (Designated only for: US)
- **ZHOU Yonglong**; 104-61, 41 Avenue, Flushing, NY 11368
  US; US(Residence); US(Nationality)
  (Designated only for: US)

Patent Applicant/Inventor:

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  (Designated only for: US)
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  61 East 86th Street, Apt. 31, New York, NY 10028; US; US(Residence); US(Nationality);
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- **ZHOU Yonglong**
  104-61, 41 Avenue, Flushing, NY 11368; US; US(Residence); US(Nationality); (Designated only for: US)

Legal Representative:

- **KANIECKI Diana J**
  321 Avenue C, Apt. 10E, New York, NY 10009; US;

	Country	Number	Kind	Date
Patent	WO	200069331	A1	20001123
Application	WO	2000US13267		20000515
Priorities	US	99134412		19990517

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB; GR; IE; IT; LU; MC; NL; PT; SE;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GW; ML; MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; SD; SL; SZ; TZ; UG; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;
Language Publication Language: English
Filing Language: English
Fulltext word count: 32620

Detailed Description:

...management of otitis media.

Rationale
Otitis media represents a costly disease state that is frequently encountered by clinicians. In order to select the most cost-**effective treatment** option, clinicians need to consider various factors such as local resistance patterns, adverse effects of the antibiotics, and **resource** use associated with **managing** successfully-treated patients as well as treatment failures. Such information may not be readily available to the clinician at the point of prescribing. The AOM...

14/3K/9 (Item 8 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00737652

GENE SEQUENCE VARIATIONS WITH UTILITY IN DETERMINING THE TREATMENT OF DISEASE
VARIATIONS DE SEQUENCES GENIQUES PRESENTANT UNE UTILITE POUR LA SELECTION DU TRAITEMENT D'UNE MALADIE

Patent Applicant/Patent Assignee:

- **VARIAGENICS INC**; 60 Hampshire Street, Cambridge, MA 02139-1562
  US; US(Residence); US(Nationality)
  (For all designated states except: US)
- **STANTON Vincent Jr**; 32 Royal Road, Belmont, MA 02173
  US; US(Residence); US(Nationality)
  (Designated only for: US)

Patent Applicant/Inventor:

- **STANTON Vincent Jr**
  32 Royal Road, Belmont, MA 02173; US; US(Residence); US(Nationality); (Designated only for: US)

Legal Representative:

- **AMES Wesley B(agent)**
  Brobeck, Phleger & Harrison LLP, 12390 El Camino Real, San Diego, CA 92130; US;

	Country	Number	Kind	Date
Patent	WO	200050639	A2-A3	20000831
Application	WO	2000US1392		20000120
Priorities	US	99121047		19990222
	US	99139440		19990615
	US	99357743		19990720

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GW; ML;
MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; SD; SL; SZ; TZ; UG;
ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;
Language Publication Language: English
Filing Language: English
Fulltext word count: 315309

Detailed Description:

   ...dia ic test, may be the only means of getting regulatory approval for a drug. As
I gnosti
healthcare becomes increasingly costly, the ability to **allocate** healthcare **resources effectively** becomes
increasingly urgent. The use of genetic tests to develop and rationally administer medicines represents a
powerful tool for accomplishing more cost **effective** medical care.

Inflammation and Immune Disease
In this application, we further address the difficulties that arise in treating inflammatory diseases and
other diseases in which...Parkinson's disease, dementia, demyelinating disease, amyotrophic lateral
sclerosis, and Huntinaton's disease.

Specifically, this invention describes the identification of genes and gene sequence variances **useful** in
the field of **therapeutics** for optimizing efficacy and safety of drug therapy by allowing prediction of
pharmacokinetic and/or toxicologic behavior of specific drugs in specific **patients**. Relevant
pharmacokinctic processes include absorption, distribution, metabolism and excretion. Relevant
toxicological processes include both dose related and idiosyncratic adverse reactions to drugs, including,
for example...or is a cDNA derived from an mRNA of the gene.

In another aspect, the invention provides a method for determining a
genotype of an **individual** in relation to one or more variances in one or more of the .genes identified in
above aspects by using mass spectrometric determination of a...one skilled in the art to identify
therapeutically relevant genes in patients with one of the listed indications for the purposes of
stratification of these **patients** based upon genotype and subsequent correiatation of genotype with drug
response. The shaded intersections indicate preferred sets of genes for
- understanding the basis of interpatient

B. Full-Text Databases – NON-PATENT

File 15:ABI/Inform(R) 1971-2009/Jun 29
    (c) 2009 ProQuest Info&Learning
File   9:Business & Industry(R) Jul/1994-2009/Jun 27
    (c) 2009 Gale/Cengage
File 610:Business Wire 1999-2009/Jun 30
    (c) 2009 Business Wire.
File 810:Business Wire 1986-1999/Feb 28
    (c) 1999 Business Wire
File 275:Gale Group Computer DB(TM) 1983-2009/Jun 02
    (c) 2009 Gale/Cengage
File 624:McGraw-Hill Publications 1985-2009/Jun 30
    (c) 2009 McGraw-Hill Co. Inc
File 621:Gale Group New Prod.Annou.(R) 1985-2009/May 25
    (c) 2009 Gale/Cengage
File 636:Gale Group Newsletter DB(TM) 1987-2009/Jun 08
    (c) 2009 Gale/Cengage
File 613:PR Newswire 1999-2009/Jun 30
    (c) 2009 PR Newswire Association Inc
File 813:PR Newswire 1987-1999/Apr 30
    (c) 1999 PR Newswire Association Inc
File 16:Gale Group PROMT(R) 1990-2009/Jun 08
    (c) 2009 Gale/Cengage
File 160:Gale Group PROMT(R) 1972-1989
    (c) 1999 The Gale Group
File 634:San Jose Mercury Jun 1985-2009/Jun 28
    (c) 2009 San Jose Mercury News
File 148:Gale Group Trade & Industry DB 1976-2009/Jun 15
    (c) 2009 Gale/Cengage
File 20:Dialog Global Reporter 1997-2009/Jun 30
    (c) 2009 Dialog

```
Set     Items    Description
S1       1093    COHORT()TIME OR RETROSPECT?()COHORT?
S2         55    S1 AND ((ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT? OR
DEVOT? OR DIVID?()UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?)(3N)(RESOURC? OR
CAPITAL OR AVAILABLE()MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET?
OR DEVELOPMENT) OR (VALUE? ?(2W)RISK OR VAR))

S3         27    S2 NOT PY>2003
S4         27    RD  (unique items)
S5        246    (EFFECTIV? OR SUCCESS? OR UTILITY OR USEFUL? OR VALUE OR WORTH? OR
BENEFI? OR ADVANTAGE? OR GAIN? ?) (4N)(INTERVENTION? OR TREATMENT? OR DIAGNOS? OR
THERAP? OR HEALTCARE OR SURGER? OR SURGICAL OR DRUG OR PHARMACEUT? OR FIX? OR CURE?
OR REPAIR? OR CORRECTION? OR CORRECTIV?)
```

```
S6        23    (ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT? OR DEVOT? OR
DIVID?()UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?)(3N)(RESOURC? OR CAPITAL OR
AVAILABLE()MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET? OR
DEVELOPMENT) OR (VALUE? ?(2W)RISK OR VAR)

S7        23    (UNIT? ? OR MEMBER? ? OR DATAPOINT? OR DATA()POINT? OR ENTITY OR
ENTITIES OR INDIVIDUAL? ? OR PERSON? ? OR SUBJECT? ? OR PATIENT? ?) (2N)(POPULATION
OR SAMPLE? OR OBSERVED OR OBSERVATION OR TO()OBSERV? OR TESTING OR TRIAL? OR STUDY
OR STUDIES OR PATIENTS? ? OR COHORT? ? OR ANALYSIS)

S8         5    (PROSPECTIV? OR RETROSPECTIV? OR TIME? ? OR AFTER OR
                FOLLOWING OR SUBSEQUENT()TO OR SINCE OR START?()("FROM"
                OR WITH))(4N)(DIAGNOS? OR PROGNOS? OR FAIL? OR DEFECT? OR
                (CONDITION OR STATUS OR TYPE OR CATEGOR???)(2N)(DEFIN? OR
                DETERMIN? OR ASCERTAIN? OR LABEL? OR DESIGNAT? OR
                ARRIV?()AT OR ASSIGN?))

S9        10    (PERIOD? ? OR YEAR? ? OR ERA OR ERAS OR HISTOR? OR TIME()(SEGMENT?
OR RANGE?) OR TIMES OR DURATION OR DURING(2N)TERM OR LONG()(TERM OR RANGE)
)(4N)(AUTHORIZ? OR USE OR USAGE OR AVAILABL? OR (IN OR ON OR POST)(2W)(MARKET? OR
CIRCULATION) OR PRESCRIBAB? OR MARKETING OR USING OR MARKETPLACE)

S10       19    (DURATION OR TIME? OR PERIOD? OR (AFTER OR
                "FROM")(2W)(START? OR COMMENC?) OR FOLLOWING OR
                SUBSEQUENT()TO OR SINCE OR PROSPECTIV? OR RETROSPECTIV?
                OR WINDOW?)(4N)(TREATMENT? OR INTERVENTION? OR THERAP? OR
                REPAIR? OR CORRECTION? OR CORRECTIV? OR ADMINISTRATION?)

S11       23    S10 OR S9 OR S8 OR S7 OR S6
S12       16    S11(50N)S5
S13       16    RD  (unique items)
S14        9    S13 NOT PY>2003
```

14/3,K/4 (Item 1 from file: 148)
DIALOG(R)File 148: Gale Group Trade & Industry DB

15979263   **Supplier Number:** 103731431 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Length of stay, conditional length of stay, and prolonged stay in pediatric asthma. (Access in Chronic Care).(a study finds the overall management of asthma admissions appears more efficient in Pennsylvania than in New York)(Illustration)

Silber, Jeffrey H.; Rosenbaum, Paul R.; Even-Shoshan, Orit; Shabbout, Mayadah; Zhang, Xuemei; Bradlow, Eric T.; Marsh, Roger R.
```
...stay" (CLOS) (Silber et al. 1999b), this report aims to provide insight
into state, city, and hospital differences in the patterns of stay for
asthma patients. Through this approach, we aim to aid policymakers
to better understand some potential etiologies for these differences, so
```

that future policy initiatives can better focus on likely avenues for
successful interventions.
      METHODS
      Patient Population
      We obtained claims data on all pediatric admissions ages 1-17 in
Pennsylvania for the period 1/1/96-12/31/98 and in New York State for the
period 1/1/96-9/30/98. **Patients** admitted to psychiatric and nonacute
care hospitals were not included in this study. Data from Pennsylvania were
provided through the Pennsylvania Health Care Cost Containment...

14/3,K/5 (Item 2 from file: 148)

13630586   **Supplier Number:** 76612720 (USE FORMAT 7 OR 9 FOR FULL TEXT)
**Asthma Prevalence, Cost, and Adherence with Expert Guidelines on the Utilization of Health
Care Services and Costs in a State Medicaid Population.(Statistical Data Included)**

Piecoro, Lance T.; Potoski, Matthew; Talbert, Jeff C.; Doherty, Dennis E.
Health Services Research , 36 , 2 , 357
June , 2001
Document Type: Statistical Data Included
ISSN: 0017-9124
Language: English
Record Type: Fulltext
Word Count: 5427   **Line Count:** 00546
...was associated with increased asthmarelated ER care and
hospitalizations. Studying the costs and appropriateness of asthma therapy
will provide insight into how current health care **resources** are
allocated and how treatment alternatives affect costs and
patient health. The **analysis** presented in this article can
help guide future health policy and resources to create more cost-
effective therapies for asthma in Medicaid populations.
      METHODS
      Data for this study were extracted from a database containing over
20 million paid claims for pharmacy, institutional (hospital...

4/3,K/3 (Item 3 from file: 15)

02198253   75498825
**Raw oyster consumption and outbreaks of viral gastroenteritis in New Zealand: Evidence for risk
to the public's health**

Abstract:
...Pacific half shell oysters and outbreaks of Norwalk-like virus (NLV)
gastroenteritis in Auckland in the last third of 1999. Ten outbreaks were
investigated as **retrospective cohorts** using standardized
questionnaires relating to food and drink exposures. Trace back of oysters
and site inspections of implicated commercial growing areas were performed.
The epidemiological...

Text:
...half shell oysters and outbreaks of Norwalk-like virus (NLV)
gastroenteritis in Auckland in the last third of 1999.

Method: Ten outbreaks were investigated as **retrospective
cohorts** using standardised questionnaires relating to food and drink
exposures. Trace back of oysters and site inspections of implicated
commercial growing areas were performed. Virological analyses...of oyster
growing areas. This, coupled with proven faecal contamination of oysters
was established for the Awaawaroa Bay growing site. New provisions
contained in the **Resource Management** (Marine Pollution)
Regulations 1998 aim to reduce the impact of human sewage contamination of
marine waters. However, the regulations permit the discharge of treated
sewage...

4/3,K/4 (Item 4 from file: 15)
DIALOG(R)File 15: ABI/Inform(R)

01905277   05-56269
Health care incentives in immunisation

Text:
...Although varying in costeffectiveness, both monetary and nonmonetary
incentives can improve childhood immunisation uptake. Evaluation of current
programs including the Australian ones will assist future **allocation**

of **resources**.

The successful use of incentives to influence behaviour and improve
productivity has led to their application in the health arena. Incentives
have been offered to...

...attractive to patients, or to offer increased earnings for identified
behaviour.7-10 Such performance-based incentives have influenced general
practitioners' (GPs') practice patterns,o **allocation** of
resources,"1 and behaviour indirectly related to health such as
participation in postgraduate education12 and response to postal surveys.13

This paper reviews the use of...the 1990 contract for general practitioners
on night visiting. Br J Gen Pract 1994; 44: 68-71. 48. Skinner J, March L,
Simpson JM. A **retrospective cohort** study of childhood
immunisation status in northern Sydney. Aust J Public Health 1995; 9: 5863.
Author Affiliation:

Helen Achat, Peter Mcintyre and Margaret Burgess National...

4/3,K/14 (Item 2 from file: 148)
DIALOG(R)File 148: Gale Group Trade & Industry DB

15979263   **Supplier Number:** 103731431 (USE FORMAT 7 OR 9 FOR FULL TEXT)
**Length of stay, conditional length of stay, and prolonged stay in pediatric asthma. (Access in
Chronic Care).(a study finds the overall management of asthma admissions appears more efficient
in Pennsylvania than in New York)(Illustration)**

Silber, Jeffrey H.; Rosenbaum, Paul R.; Even-Shoshan, Orit; Shabbout, Mayadah; Zhang, Xuemei;
Bradlow, Eric T.; Marsh, Roger R.
Health Services Research , 38 , 3 , 867(20)
June , 2003
Document Type: Illustration
ISSN: 0017-9124
Language: English
Record Type: Fulltext; Abstract
Word Count: 7080   **Line Count:** 00725
Author Abstract: ...the states of Pennsylvania and New York using claims data obtained from each
state for the years 1996-1998, n = 38,310.
   Study Design. A **retrospective cohort** design to model length of stay (LOS), the probability of
prolonged stay, conditional length of stay (CLOS or the LOS after stay is prolonged), and...

Text:
...yes/no) indicating readmission within three weeks of discharge.
     Each outcome describes different aspects of medical care. The

overall LOS provides insight into the overall **allocation** of
resources by the provider. The prolonged stay variable describes the
ability of providers to effectively treat and discharge the less
complicated patient in a rapid manner...

4/3,K/15 (Item 3 from file: 148)
DIALOG(R)File 148: Gale Group Trade & Industry DB
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15859425   **Supplier Number:** 102090745 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Health care costs among smokers, former smokers, and never smokers in an HMO.

Fishman, Paul A.; Khan, Zeba M.; Thompson, Ella E.; Curry, Susan J.
Language: English
Record Type: Fulltext; Abstract
Word Count: 5784   **Line Count:** 00534
Author Abstract: Objective. We estimate long-term health care costs of former smokers compared with
continuing and never smokers using a **retrospective cohort** study of HMO enrollees. Previous research
on health care costs associated with former smokers has suggested that quitters may incur greater health
care costs than in western Washington state.
   Study Design. **Retrospective cohort** study using automated and primary data collected through
telephone interviews.
   Principal Findings. We find that former smokers' costs are significantly greater (p<.05) in the...

Text:
...because we assumed that they were unlikely to start smoking as adults.
        Health Care Costs
        Beginning in January 1990, GHC information systems capture and fully
allocate health service **costs** for all internal services
provided directly by GHC as well as for claims for covered services that
enrollees receive from contracted providers (Fishman et al. 1997). To
allocate costs, a **resource** intensity **weight** is
assigned to each service, procedure, pharmacy fill, or diagnostic test
provided by GHC or its contracted providers. The methodology for computing
the **resource** intensity **weight** is unique to each cost center
in the delivery system. ...margin is included in this allocation, but
because GHC is organized as a nonprofit consumer-governed cooperative,
these revenues are redistributed into the delivery system.
        Costs allocated to GHC enrollees for services received
from providers outside the GHC group model are GHC's payment to those
providers. Although such ...typical year. Costs to non-GHC providers
represent approximately 25 percent of total delivery system costs in a
typical year (Fishman et al. 1997). The **cost allocation**
system allows the identification of costs for specific encounters and
services as well as aggregation of costs for individuals over ...truncated

cost data for subjects that disenrolled from GHC after December 1994.
    An additional empirical challenge in estimating the model is caused
by the skewed **distribution** of health care **costs,** which
results in nonnormally distributed regression residuals that limit the use
of standard linear regression methods for estimating the model. To address
this challenge we Madden, and Hornbrook 1999), regression residuals are
modeled based on the gamma distribution, an approach that has been
demonstrated as an appropriate **distribution** for health care
costs. To assess the sensitivity of our results to this choice of
empirical specification we also estimated the model using Generalized
Estimating Equations (GEE).
    We adjust...Nonvolunteer Smokers." Journal of Consulting and
Clinical Psychology 63 (6): 1005-14.
    Fishman, P., M. Von Korff, P. Lozano, and J. Hecht. 1997. "Chronic
Care **Costs** in **Managed** Care." Health Affairs 16 (3): 239-47.
    Gritz, E. R., C. R. Carr,

4/3,K/11 (Item 3 from file: 16)
DIALOG(R)File 16: Gale Group PROMT(R)

09731971   **Supplier Number:** 84393211 (**USE FORMAT 7 FOR FULLTEXT**)

Diabetes-Related Morbidity and Mortality in a National Sample of U.S. Elders.
(Epidemiology/Health Services/Psychosocial Research).
Bertoni, Alain G.; Krop, Julie S.; Anderson, Gerard F.; Brancati, Frederick L.
Diabetes Care , v 25 , n 3 , p 471(5)
March , 2002
Language: English   **Record Type:** Fulltext
Document Type: Magazine/Journal; Refereed ; Professional
Word Count: 4314
-
...is unclear. Better understanding of the burden of diabetes in the
elderly might guide decisions about treatment and prevention at the
individual level and about **allocation** of public health
resources at the national level. Therefore, we sought to determine
all-cause mortality rates and the incidence of serious diabetes-related
complications in a nationally representative...Boyle DI, Ebrahim AR,
Vasudev N, Stewart CP, Jung RT, Leese GP, MacDonald TM, Newton RW: Diabetes
and lower-limb amputations in the community: a **retrospective**
cohort study. Diabetes Care

4/3,K/12 (Item 4 from file: 16)
DIALOG(R)File 16: Gale Group PROMT(R)

08411299 **Supplier Number:** 69493727 **(USE FORMAT 7 FOR FULLTEXT)**

Potential Short-Term Economic Benefits of Improved Glycemic Control: A managed care perspective.
MENZIN, JOSEPH; LANGLEY-HAWTHORNE, CLARE; FRIEDMAN, MARK; BOULANGER, LUKE; CAVANAUGH, ROBERT
Diabetes Care , v 24 , n 1 , p 51
Jan , 2001
Language: English   **Record Type:** Fulltext
Document Type: Magazine/Journal; Refereed ; Professional
Word Count: 4990
  Supplier Number: (USE FORMAT 7 FOR FULLTEXT)

Text:

 ...diabetes. The goal of this study was to examine the potential
impact of improved glycemic control on selected short-term complications of
diabetes and associated **costs** in a **managed** care setting.
  RESEARCH DESIGN AND METHODS-- Using a **retrospective cohort**
design and automated databases from 1 January 1994 to 30 June 1998, adult
members of the Fallon Clinic who were diagnosed with diabetes were
identified...

...diabetes, such as ischemic heart disease, kidney disease, or
retinopathy, versus those without these complications?
       RESEARCH AND DESIGN METHODS -- This study was based on a
retrospective cohort design and used automated enrollment,
medical and pharmacy claims, and clinical laboratory data files from the
Fallon Clinic in Worcester, Massachusetts, a multispecialty group clinic...

File 149:TGG Health&Wellness DB(SM) 1976-2009/May W5
      (c) 2009 Gale/Cengage
File 444:New England Journal of Med. 1985-2009/Jun W3
      (c) 2009 Mass. Med. Soc.
File 129:PHIND(Archival) 1980-2009/May W4
      (c) 2009 Informa UK Ltd
File 130:PHIND(Daily & Current) 2009/Jun 30
      (c) 2009 Informa UK Ltd

```
12/3,K/9 (Item 9 from file: 149) Set     Items   Description
S1      82181    (ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT? OR DEVOT? OR
DIVID?()UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?)(3N)(RESOURC? OR CAPITAL OR
AVAILABLE()MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET? OR
DEVELOPMENT) OR (VALUE? ?(2W)RISK OR VAR)

S2        2    S1(12N)(S COHORT()TIME OR RETROSPECT?()COHORT? )
S3        1    S2 NOT PY>2003
S4     11099    (EFFECTIV? OR SUCCESS? OR UTILITY OR USEFUL? OR VALUE OR WORTH? OR
BENEFI? OR ADVANTAGE? OR GAIN? ?) (4N)(INTERVENTION? OR TREATMENT? OR DIAGNOS? OR
THERAP? OR HEALTCARE OR SURGER? OR SURGICAL OR DRUG OR PHARMACEUT? OR FIX? OR CURE?
OR REPAIR? OR REPAR? OR CORRECTION? OR CORRECTIV?)

S5      7538    (UNIT? ? OR MEMBER? ? OR DATAPOINT? OR DATA()POINT? OR ENTITY OR
ENTITIES OR INDIVIDUAL? ? OR PERSON? ? OR SUBJECT? ? OR PATIENT? ?) (2N)(POPULATION
OR SAMPLE? OR OBSERVED OR OBSERVATION OR TO()OBSERV? OR TESTING OR TRIAL? OR STUDY
OR STUDIES OR PATIENTS? ? OR COHORT? ? OR ANALYSIS)

S6      1133    PROSPECTIV? OR RETROSPECTIV? OR TIME? ? OR AFTER OR
                FOLLOWING OR SUBSEQUENT()TO OR SINCE OR START?()("FROM"
                OR WITH))(4N)(DIAGNOS? OR PROGNOS? OR FAIL? OR DEFECT? OR
                (CONDITION OR STATUS OR TYPE OR CATEGOR???)(2N)(DEFIN? OR
                DETERMIN? OR ASCERTAIN? OR LABEL? OR DESIGNAT? OR
                ARRIV?()AT OR ASSIGN?))

S7      1915    (PERIOD? ? OR YEAR? ? OR ERA OR ERAS OR HISTOR? OR TIME()(SEGMENT?
OR RANGE?) OR TIMES OR DURATION OR DURING(2N)TERM OR LONG()(TERM OR RANGE)
)(4N)(AUTHORIZ? OR USE OR USAGE OR AVAILABL? OR (IN OR ON OR POST)(2W)(MARKET? OR
CIRCULATION) OR PRESCRIBAB? OR MARKETING OR USING OR MARKETPLACE)

S8      2358    (DURATION OR TIME? OR PERIOD? OR (AFTER OR
                "FROM")(2W)(START? OR COMMENC?) OR FOLLOWING OR
                SUBSEQUENT()TO OR SINCE OR PROSPECTIV? OR RETROSPECTIV?
                OR WINDOW?)(4N)(TREATMENT? OR INTERVENTION? OR THERAP? OR
                REPAIR? OR CORRECTION? OR CORRECTIV? OR ADMINISTRATION?)

S9       151    S5 AND S6 AND S7 AND S8
S10       50    S9(20N)S1
S11       36    S10 NOT PY>2003
S12       36    RD  (unique items)
```

02006852   **Supplier Number:** 76653435 (USE FORMAT 7 OR 9 FOR FULL TEXT)
A Collaborative Program for Cardiovascular Patient Follow-up.(Statistical Data Included)

DEATON, CHRISTI; KURTZ, SHERRON; WEINTRAUB, WILLIAM S.
AORN Journal , 74 , 1 , 22
July ,
2001
Document Type: Statistical Data Included   **Publication Format:** Magazine/Journal
ISSN: 0001-2092
Language: English
Record Type: Fulltext; Abstract **Target Audience:** Professional
Word Count: 4222   **Line Count:** 00404
...gastro-intestinal

disturbance	1.3%	20%	1.4%
Sleep disturbance	7.5%	31%	21%
Leg problems	5%	4%	5.5%
Other	7%	10%	5.5%

     Patients
 frequently expressed more than one concern, so numbers do
     not add up to 100%; P < .001 for differences in the
distribution
     of reported concerns.
      RESOURCE USE
      There were significant group differences in resource **use**
during the 30-day **period** after undergoing cardiovascular procedures.
The majority of patients (95%) saw a physician during this time and cited
routine follow-up as the primary reason for...

12/3,K/14 (Item 14 from file: 149)
DIALOG(R)File 149: TGG Health&Wellness DB(SM)

01857034   **Supplier Number:** 19928331 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Exploring the research base and outcome measures for portable bladder ultrasound technology.

Wagner, Michele L.; Schmid, Marlene M.
MedSurg Nursing , v6 , n5 , p304(11)
Oct ,
1997
 Publication Format: Magazine/Journal; Refereed
ISSN: 1092-0811
Language: English

Record Type: Fulltext; Abstract **Target Audience:** Professional
Word Count: 6559   **Line Count:** 00646
```
...enhancing patient and nurse satisfaction, and (e) cost savings for the
patient and the institution. Cost savings are associated with reductions in
catheter equipment, nursing time, and treatment costs.
      The projected budget is variable. Costs vary depending
on the model of BladderScan BVI technology and options selected. The
projected budget should include initial and ongoing costs. Initial costs
include: (a...
```

12/3,K/33 (Item 1 from file: 444)
DIALOG(R)File 444: New England Journal of Med.

00119956

Medical Progress: Unstable Angina Pectoris (Review Article)

Yeghiazarians, Yerem; Braunstein, Joel B.; Askari, Arman; Stone, Peter H.
The New England Journal of Medicine
Jan 13 , 2000 ; 342 (2),pp 101-114
Line Count: 00756   **Word Count:** 10436

Text:
...be at low risk may be suitable for continued medical management. Use of an early, reliable risk-stratification process may permit the appropriate and economical **allocation** of medical **resources** and the optimal outcomes for **patients**.

12/3,K/15 (Item 15 from file: 149)
DIALOG(R)File 149: TGG Health&Wellness DB(SM)

01815946   **Supplier Number:** 53621977 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Health service costs and quality of life for early elective surgery or ultrasonographic surveillance for small abdominal aortic aneurysms.

Forbes, J. F.
The Lancet , 352 , 9141 , 1656(1)
Nov 21 ,
1998

```
...day case ((British pounds) 369) and attendance at outpatient clinics
((British pounds) 55) were calculated from unit costs reported from a
national system of hospital cost statistics,11 weighted by
the number of patients randomised in the trial centres in Scotland
(18'7 of 1090). The cost of attendance at outpatient clinics for routine
ultrasonographic surveillance ((British pounds) 84) was...


...item recoding, treatment of missing items, and scoring.
     Statistical analysis
     We analysed health service costs and quality of life by intention to
treat. The cumulative cost distribution arising from
ultrasonographic surveillance, aneurysm repair, and the use of other health
services was summarised by mean costs observed for all
patients in accordance with the full-sample method, with no
adjustment for censored cases.15 Distribution of surveillance
costs was measured from randomisation until aneurysm repair and from
randomisation until the last recorded follow-up visit for patients
under surveillance. We included aneurysm repair costs in the cumulative
cost distribution, irrespective of the timing of surgical
repair during follow-up. Information on the use of other health services,
not directly related to the surgical management...
```

Decreasing Risk Of Leukemia With Prolonged Follow-up After Chemotherapy And Radiotherapy For Hodgkin's Disease (Original Article)

Blayney, Douglas W.; Longo, Dan L.; Young, Robert C.; Greene, Mark H.; Hubbard, Susan M., R.N.;
Postal, Marcia G., R.N., M.S.; Duffey, Patricia L., R.N.; DeVita, Vincent T., Jr.

Text:
...events occurred at the same time after the start of observation. An estimated risk function was
computed, expressing the risk of an event per total **person**-years of **observation** during each interval.

The estimated **value** of the **risk** function was used in a multiple linear regression analysis. The natural logarithm of the estimated risk was selected as the dependent variable, and time and...

IV. Text Search Results from Dialog (Abstract dbs)

A. Abstract Databases -- Patent

File 347:JAPIO Dec 1976-2009/Jan(Updated 090503)
(c) 2009 JPO & JAPIO
File 350:Derwent WPIX 1963-2009/UD=200939
(c) 2009 Thomson Reuters

```
Set     Items    Description

S1      106273   (ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT OR DEVOT? OR
DIVID? () UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?) (3N) (RESOURC? OR CAPITAL OR
AVAILABLE () MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET? OR
DEVELOPMENT? OR (VALUE? ? (2W) RISK OR VAR)

S2      1708     (EFFECTIV? OR SUCCESS? OR UTILITY OR USEFUL? OR VALUE OR WORTH? OR
BENEFI? OR ADVANTAGE? OR GAIN? ?) (4N) (INTERVENTION? OR TREATMENT? OR DIAGNOS? OR
THERAP? OR HEALTCARE OR SURGER? OR SURGICAL OR DRUG OR PHARMACEUT? OR FIX? OR CURE?
OR REPAIR? OR REPAR? OR CORRECTION? OR CORRECTIV?)

S3      0        COHORT () TIME OR RETROSPECT? () COHORT?

S4      260      S1(12N)S2

S5      1        S4 AND COHORT?

S6      102      (UNIT? ? OR MEMBER? ? OR DATAPOINT? OR DATA () POINT? OR ENTITY OR
ENTITIES OR INDIVIDUAL? ? OR PERSON? ? OR SUBJECT? ? OR PATIENT? ?) (2N) (POPULATION
OR SAMPLE? OR OBSERVED OR OBSERVATION OR TO () OBSERV? OR TESTING OR TRIAL?  OR STUDY
OR STUDIES OR PATIENTS? ? OR COHORT? ? OR ANALYSIS)

S7      34       (PROSPECTIV? OR RETROSPECTIV? OR TIME? ? OR AFTER OR FOLLOWING OR
SUBSEQUENT () TO OR SINCE OR START? () (" (4N) (DIAGNOS? OR PROGNOS? OR FAIL? OR DEFECT?
OR (CONDITION? OR STATUS OR TYPE OR CATEGOR???) (2N) (DEFIN? OR DETERMIN? OR ASCERTAIN?
OR LABEL? OR DESIGNAT? OR ARRIV? () AT OR ASSIGN?)) FROM" OR WITH))

S8      29       (PERIOD? ? OR YEAR? ?  OR ERA OR ERAS OR HISTOR? OR TIME () (SEGMENT?
OR RANGE?) OR TIMES OR DURATION OR DURING (2N) TERM OR LONG () (TERM OR RANGE)
) (4N) (AUTHORIZ? OR USE OR USAGE OR AVAILABL? OR (IN OR ON OR POST) (2W) (MARKET? OR
CIRCULATION) OR PRESCRIBAB? OR MARKETING OR USING OR MARKETPLACE)

S9      104      (DURATION OR TIME? OR PERIOD? OR (AFTER OR " (2W) (START? OR
COMMENC?) OR FOLLOWING OR SUBSEQUENT () TO OR SINCE OR PROSPECTIV? OR RETROSPECTIV? OR
WINDOW?) (4N) (TREATMENT? OR INTERVENTION? OR THERAP? OR REPAIR? OR CORRECTION? OR
CORRECTIV? OR ADMINISTRATION?) FROM"

S10     237      S6 OR S7 OR S8 OR S9

S11     236      S10 NOT S5

S12     122      S11 NOT AY>2003

S13     21       S12(20N)S1

S14     21       IDPAT (sorted in duplicate/non-duplicate order)

S15     21       IDPAT (primary/non-duplicate records only)
```

15/3,K/16 (Item 16 from file: 350)
DIALOG(R)File 350: Derwent WPIX
0009798447 *Drawing available*
WPI Acc no: 2000-087630/200008
Related WPI Acc No: 1998-251718
XRAM Acc no: C2000-024507
XRPX Acc No: N2000-068882
Computer implement disease and condition management for at-risk patient intervention
Patent Assignee: SMITHKLINE BEECHAM CORP (SMIK)
Inventor: BOYKO D A; GALLO E F; LANGER D; PRESS B; STAVRAKAS S; WONG B J O

Patent Family (2 patents, 1 countries)							
Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
AU 199953551	A	19991202	AU 199739307	A	19970929	200008	B
			AU 199953551	A	19991008		
AU 727263	B	20001207	AU 199739307	A	19970929	200103	E
			AU 199953551	A	19991008		

Priority Applications (no., kind, date): US 199627074 P 19960930

Patent Details					
Patent Number	Kind	Lan	Pgs	Draw	Filing Notes
AU 199953551	A	EN	71	13	Division of application	AU 199739307
AU 727263	B	EN			Division of application	AU 199739307
					Previously issued patent	AU 9953551

Alerting Abstract ...ADVANTAGE - Using the intervention **management** system provides a **cost** effective method that uses the best up to date medical practices available. If **patients** are treated with therapy regimens that have proven effective for other patients with the same disease then the number of cases and cost of each...

Dialog eLink: Order File History
15/3,K/9 (Item 9 from file: 350)
DIALOG(R)File 350: Derwent WPIX

0010741911 *Drawing available*
WPI Acc no: 2001-354523/200137
XRPX Acc No: N2001-257596
Computer-based system has computer executable instruction for projecting cost and benefits

linked to disease management intervention over predetermined period based on received population specific data

Patent Assignee: GLAXO GROUP LTD (GLAX)
Inventor: HALPERN M T; KHAN Z M; KHAN Z M G W I; OLSON P S; OLSON P S G W I; YOUNG T L; YOUNG T L G W I

Patent Family (4 patents, 93 countries)							
Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
WO 2001009758	A2	20010208	WO 2000US21106	A	20000802	200137	B
AU 200063971	A	20010219	AU 200063971	A	20000802	200137	E
EP 1198755	A2	20020424	EP 2000950944	A	20000802	200235	E
			WO 2000US21106	A	20000802		
JP 2003522994	W	20030729	WO 2000US21106	A	20000802	200358	E
			JP 2001514696	A	20000802		

Priority Applications (no., kind, date): US 1999366007 A 19990802

Patent Details					
Patent Number	**Kind**	**Lan**	**Pgs**	**Draw**	**Filing Notes**
WO 2001009758	A2	EN	90	14	
National Designated States, Original				AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CR CU CZ DE DK DM DZ EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW		
Regional Designated States, Original				AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ NL OA PT SD SE SL SZ TZ UG ZW		
AU 200063971	A	EN		Based on OPI patent	WO 2001009758
EP 1198755	A2	EN		PCT Application	WO 2000US21106
				Based on OPI patent	WO 2001009758
Regional Designated States, Original				AL AT BE CH CY DE DK ES FI FR GB GR IE IT LI LT LU LV MC MK NL PT RO SE SI		
JP 2003522994	W	JA	86	PCT Application	WO 2000US21106
				Based on OPI patent	WO 2001009758

Original Publication Data by Authority**Argentina****Publication No. ...****Original Abstracts:**provide a graphical user interface through which a user inputs population-specific data for a population to be treated or offered treatment in a disease **management** intervention. **Costs** and **benefits** associated **with** the disease **management** intervention are projected over **a time period** for the **population** based on the

user-specified data. The costs and benefits are output to the user to facilitate evaluation of the economic impact of the disease... ... provide a graphical user interface through which a user inputs population-specific data for a population to be treated or offered treatment in a disease **management** intervention. **Costs** and benefits associated with the disease **management** intervention **are** projected over a **time period** for the **population** based on the user-**specified** data. The costs and benefits are output to the user to facilitate evaluation of the economic impact of the disease management intervention...

0013463867 *Drawing available*
WPI Acc no: 2003-555387/200352
XRAM Acc no: C2003-149929
XRPX Acc No: N2003-441102
Data processing system for implementing program controlled management of physician-patient interactions, comprises workstation programs for providing patient history, data base server and communication server
Patent Assignee: SOLL A H (SOLL-I); SOLL L V (SOLL-I)
Inventor: SOLL A H; SOLL L V

Patent Family (1 patents, 1 countries)							
Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
US 20030055679	A1	20030320	US 1999289044	A	19990409	200352	B

Priority Applications (no., kind, date): US 1999289044 A 19990409

Patent Details					
Patent Number	**Kind**	**Lan**	**Pgs**	**Draw**	**Filing Notes**
US 20030055679	A1	EN	49	13	

Alerting Abstract ... and potential diagnosis; a database server for accessing the workstation programs, to form a local area network for storing medical information related to number of **patients** and is adapted to **manage** the **cost** of medical **care**, utilization of one or **more** physicians, **laboratory** data, indication, reference data, surgery data and/or pathology data; and a communication server adapted for connecting to the Internet, hospital computer network and/or...

0010460992 *Drawing available*
WPI Acc no: 2001-060511/200107
XRPX Acc No: N2001-045308
**Treatment determining method for patient through network, involves computing risk value
indicating likelihood of patient from developing disease and adjusting computed risk value**
Patent Assignee: DENTAL MEDICINE INT LLC (DENT-N)
Inventor: MARTIN J; MARTIN J A; NOLF R; NOLF R R

Patent Family (5 patents, 88 countries)							
Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
WO 2000057310	A1	20000928	WO 2000US7712	A	20000323	200107	B
AU 200039127	A	20001009	AU 200039127	A	20000323	200108	E
US 20020004725	A1	20020110	US 1999125931	P	19990323	200208	E
			US 1999396404	A	19990915		
US 6484144	B2	20021119	US 1999125931	P	19990323	200280	E
			US 1999396404	A	19990915		
US 20030154109	A1	20030814	US 1999125931	P	19990323	200355	E
			US 1999396404	A	19990915		
			US 2002289711	A	20021107		

Priority Applications (no., kind, date): US 1999125931 P 19990323; US 1999396404 A 19990915; US
2002289711 A 20021107

Patent Number	Kind	Lan	Pgs	Draw	Division of application	US 1999396404
WO 2000057310	A1	EN	36	7	Division of patent Filing Notes US 6484144	
National Designated States,Original					AE AL AM AT AU AZ BA BB BG BR BY CA CH CN CR CU CZ DE DK DM EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT TZ UA UG UZ VN YU ZA ZW	
Regional Designated States,Original					AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW NL OA PT SD SE SL SZ TZ UG ZW	
AU 200039127	A	EN			Based on OPI patent	WO 2000057310
US 20020004725	A1	EN			Related to Provisional	US 1999125931
US 6484144	B2	EN			Related to Provisional	US 1999125931
US 20030154109	A1	EN			Related to Provisional	US 1999125931

Original Publication Data by Authority Argentina **Publication No.** ... **Original Abstracts:** provider. The outcomes (208) associated with treatment and risk assessment are fed back into the healthcare system to increase its accuracy and subsequent effectiveness in **computing** risk **values** over **time**.

0009027144 *Drawing available*
WPI Acc no: 1998-584091/199850
XRPX Acc No: N1998-455218
Surgical Instrument Management System e.g. for individual identification of surgical instruments - has process control program to generate stencils which are used to permanently mark each individual surgical instrument with non acid based etch to show unique identification number, tray name with data logged onto computer
Patent Assignee: SYSTEMS INFORMATION TECHNOLOGIES PTY LTD (SYST-N); TOOL & INSTR ENG PTY LTD (TOOL-N)
Inventor: OSBORNE G; OSBORNE P; STANTON M

			Patent Family (3 patents, 20 countries)				
Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
AU 697140	B	19980924	AU 199871932	A	19980618	199850	B
WO 1999066444	A1	19991223	WO 1999AU492	A	19990618	200007	E
AU 199944911	A	20000105	AU 199944911	A	19990618	200024	E

Priority Applications (no., kind, date): AU 199871932 A 19980618

				Patent Details	
Patent Number	Kind	Lan	Pgs	Draw	Filing Notes
AU 697140	B	EN	6	1	
WO 1999066444	A1	EN			
National Designated States, Original	AU US				
Regional Designated States, Original	AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE
AU 199944911	A	EN			Based on OPI patent WO 1999066444

Alerting Abstract ...The Surgical Instrument Management provides the only method of direct **allocation** of surgical **costs** to **individual patients**.

?

5/3,K/1 (Item 1 from file: 350)
DIALOG(R)File 350: Derwent WPIX
(c) 2009 Thomson Reuters. All rights reserved.

0014179605
WPI Acc no: 2004-364874/200434
XRAM Acc no: C2004-137749
XRPX Acc No: N2004-291838
Set of probes for detecting relevant variants in target genes relating to adverse events, comprises nucleotide probes complementary to DNA and RNA sequences of genes such as apolipoprotein E gene, or angiotensinogen gene
Patent Assignee: SCIONA LTD (SCIO-N)
Inventor: GRIMALDI K; ROBERTS G W

Patent Family (3 patents, 104 countries)							
Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
WO 2004033722	A2	20040422	WO 2003GB4051	A	20030923	200434	B
AU 2003269159	A1	20040504	AU 2003269159	A	20030923	200465	E
AU 2003269159	A8	20051103	AU 2003269159	A	20030923	200629	E

Priority Applications (no., kind, date): GB 200222042 A 20020923

AU 2003269159	A8	EN		Patent Based on OPI patent		WO 2004033722
Patent Number	**Kind**	**Lan**	**Pgs**	**Draw**	**Filing Notes**	
WO 2004033722	A2	EN	68	0		
National Designated States,Original				AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE EG ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NI NO NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG US UZ VC VN YU ZA ZM ZW		
Regional Designated States,Original				AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW		
AU 2003269159	A1	EN			Based on OPI patent	WO 2004033722

Alerting Abstract ... general health screening, occupational health purposes, health care planning on a population basis, and other health care management utilizations. (I) or (II) is useful for **development** of new strategies **of therapeutic intervention** and in clinical **trials**, construction of and generation of algorithms for patient and health care management, and for modeling or assessing the impact of diseases or health care management strategies on individuals, groups, patient **cohorts** or populations. (I) or (II) is useful for modeling, assessing or **exploring** the theoretical impact of diseases and health care management strategies on individuals, groups, patient **cohorts** or populations. (I) or (II) is useful for predicting optimum configuration/**management** of therapeutic intervention, identifying of gene variants, which is an indicative of a higher risk of experiencing adverse events for the patient

B. Abstract Databases – NON-PATENT

```
Set     Items   Description
S1      973029    (ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT? OR DEVOT? OR
DIVID?()UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?)(3N)(RESOURC? OR CAPITAL OR
AVAILABLE()MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET? OR
DEVELOPMENT) OR (VALUE? ?(2W)RISK OR VAR)

S2      23262     (EFFECTIV? OR SUCCESS? OR UTILITY OR USEFUL? OR VALUE OR WORTH? OR
BENEFI? OR ADVANTAGE? OR GAIN? ?) (4N)(INTERVENTION? OR TREATMENT? OR DIAGNOS? OR
THERAP? OR HEALTCARE OR SURGER? OR SURGICAL OR DRUG OR PHARMACEUT? OR FIX? OR CURE?
OR REPAIR? OR REPAR? OR CORRECTION? OR CORRECTIV?)

S3      76      COHORT()TIME OR RETROSPECT?()COHORT?
```

```
S4        35    S3 NOT PY>2003
S5        22    RD  (unique items)
S6         0    COHORT()TIME
S7       139    COHORT()TIME
S8        82    RD  (unique items)
S9        44    S8 NOT PY>2003
S10        1    S5(12N)S1
S11    10520    (UNIT? ? OR MEMBER? ? OR DATAPOINT? OR DATA()POINT? OR ENTITY OR
ENTITIES OR INDIVIDUAL? ? OR PERSON? ? OR SUBJECT? ? OR PATIENT? ?) (2N)(POPULATION
OR SAMPLE? OR OBSERVED OR OBSERVATION OR TO()OBSERV? OR TESTING OR TRIAL? OR STUDY
OR STUDIES OR PATIENTS? ? OR COHORT? ? OR ANALYSIS)
S12      631    (PROSPECTIV? OR RETROSPECTIV? OR TIME? ? OR AFTER OR
                    FOLLOWING OR SUBSEQUENT()TO OR SINCE OR START?()("FROM"
                    OR WITH))(4N)(DIAGNOS? OR PROGNOS? OR FAIL? OR DEFECT? OR
                    (CONDITION OR STATUS OR TYPE OR CATEGOR???)(2N)(DEFIN? OR
                    DETERMIN? OR ASCERTAIN? OR LABEL? OR DESIGNAT? OR
                    ARRIV?()AT OR ASSIGN?))

S13      649    (PERIOD? ? OR YEAR? ? OR ERA OR ERAS OR HISTOR? OR TIME()(SEGMENT?
OR RANGE?) OR TIMES OR DURATION OR DURING(2N)TERM OR LONG()(TERM OR RANGE)
)(4N)(AUTHORIZ? OR USE OR USAGE OR AVAILABL? OR (IN OR ON OR POST)(2W)(MARKET? OR
CIRCULATION OR PRESCRIBAB? OR MARKETING OR USING OR MARKETPLACE)
S14     2175    (DURATION OR TIME? OR PERIOD? OR (AFTER OR
"FROM")(2W)(START? OR COMMENC?) OR FOLLOWING OR SUBSEQUENT()TO OR SINCE OR
PROSPECTIV? OR RETROSPECTIV? OR WINDOW?)(4N)(TREATMENT? OR INTERVENTION? OR THERAP?
OR REPAIR? OR CORRECTION? OR CORRECTIV? OR ADMINIST?)
S15        4    S11 AND S12 AND S13 AND S14
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9/5,K/14 (Item 10 from file: 5)
DIALOG(R)File 5: Biosis Previews(R)

14522954 Biosis No.: 199800317201
Evaluation of mortality factors and risk analysis for the design of an integrated pest management system

Author: Roux Olivier (Reprint); Baumgartner Johann
Author Address: Swiss Federal Office Agriculture, Mattenhofstr. 5, CH-3003 Bern, Switzerland**Switzerland

Abstract: A probabilistic approach of survival analysis based on the theory of competing risks was applied to the potato tuber moth Phthorimaea operculella (Zeller) affecting tubers in Tunisian rustic stores. Exponential curve of death. i.e., constant force of mortality functions were used in a case study on a **cohort time** basis. The additive property of crude cause-specific forces of mortality is used to combine mortality factors. which permits to judge different control strategies. In an integrated pest management perspective, the effect of basic mortalities, i.e., innate and dispersal related mortalities is recombined with native natural

enemies. Thereafter, we calculate the force of additional compatible control factors needed to reduce the proportion of infested tubers below an economically relevant level. Control strategies based on native natural enemies are shown to have variable effects which put farmers at economic risks. The general importance of integrating compatible control factors is recognized in the evaluation of virus applications. Based on risk analyses. Tunisian potto growers were recommended, in the case of standard initial infestations of five eggs per tuber, to use virus preparations at a higher dosage than the 0.0015 larval equivalent kg as used in this study. Moreover, the study confirms the general importance of entering potatoes with low infestation levels into rustic shelters. This considerably decreases the risk of exceeding the economic threshold and make virus based control efficient even at low dosages. If the initial infestation considerably exceeds five eggs per tuber, the integration of a compatible control factor becomes more difficult. Nevertheless, even in absence of additional control factors the infestation of tubers does not exceed 50%.

DESCRIPTORS:
Major Concepts: Mathematical Biology--Computational Biology; Pest Assessment Control and Management
Biosystematic Names: Lepidoptera--Insecta, Arthropoda, Invertebrata, Animalia; Solanaceae-- Dicotyledones, Angiospermae, Spermatophyta, Plantae
Organisms: Phthorimaea-operculella {potato tuber moth} (Lepidoptera)--storage pest; potato (Solanaceae)--crop
Common Taxonomic Terms: Animals; Arthropods; Insects; Invertebrates; Angiosperms; Dicots; Plants; Spermatophytes; Vascular Plants
 Geographical Name: Tunisia (Palearctic region)
 Miscellaneous Terms: Concept Codes: competing risks; economics; hazard rate functions; integrated pest management; mortality factors; survival analysis
Concept Codes:
60015 Economic entomology - Integrated control
 05500 Social biology and human ecology
 12510 Pathology - Necrosis
  54600 Pest control: general, pesticides and herbicides
  60008 Economic entomology - Stored products
 64076 Invertebrata: comparative, experimental morphology, physiology and pathology - Insecta: physiology
Biosystematic Codes:
75330 Lepidoptera
 26775 Solanaceae

Abstract: ...affecting tubers in Tunisian rustic stores. Exponential curve of death. i.e., constant force of mortality functions were used in a case study on a **cohort time** basis. The additive property of crude cause-specific forces of mortality is used to combine mortality factors. which permits to judge different control strategies. In...

14377618   **Biosis No.:** 199800171865
Cost-identification analysis in oral cavity cancer management

Author: Funk Gerry F (Reprint); Hoffman Henry T; Karnell Lucy Hynds; Ricks Joan M; Zimmerman M Bridget; Corbae Dean P; Hussey David H; McCulloch Timothy M; Graham Scott M; Dawson Cindy J; Means Mary E; Colwill Margaret L; Titler Marita G; Smith Elaine M
Author Address: Dep. Otolaryngol.-Head Neck Surg., 200 Hawkins Dr., Room E230GH, Univ. Iowa Hosp. Clin., Iowa City, IA 52242, USA**USA

Abstract: The objectives of this study were to investigate potential relationships between pretreatment patient-mix characteristics, treatment modalities, and costs generated during the pretreatment work-up, treatment, and 1-year follow-up periods for patients with oral cavity cancer (OCC). Another objective was to identity potential areas for cost reduction and improved **resource allocation** in the **management** of OCC patients. Using a **retrospective cohort** of 73 patients with OCC, pretreatment patient-mix characteristics and treatment modalities were evaluated in relation to university-based charges incurred during the pretreatment evaluation, treatment, and 1-year follow-up periods. Simple regression and stepwise multiple regression analyses were used to develop predictive models for cost based on independent variables, including age, AJCC TNM clinical stage, smoking history, American Society of Anesthesiologists (ASA) class, comorbidity as defined by the Kaplan-Feinstein grade and treatment modality. The dependent measurements included all physician, office, and hospital charges incurred at the University of Iowa Hospitals and Clinics during the pretreatment evaluation, treatment, and follow-up periods, as well as the total pretreatment through 1-year follow-up management costs. Independent variables that were identified as being significantly associated with treatment costs included T classification, N classification, TNM stage, unimodality versus multimodality treatment, and the Kaplan-Feinstein comorbidity grade. Age, smoking status, and ASA class were not significantly associated with costs. The majority of the OCC management costs were incurred during the treatment period. The most substantial decreases in management costs for OCC will be realized through measures that allow identification and treatment of disease at an early stage, in which single-modality treatment may effectively be used. Resource allocation for OCC should support the investigation of measures through which the diagnosis and treatment of OCC at the earliest possible stage is facilitated. The presence of comorbid illness is a significant component in the determination of management costs for OCC and should be included in analyses of resource allocation for OCC. The singular diagnosis of OCC encompasses a wide range of patient illness severity, and diagnosis-related reimbursement schemes for OCC treatment should optimally differentiate between early and advanced stage disease.

DESCRIPTORS:
Major Concepts: Dental Medicine--Human Medicine, Medical Sciences; Oncology--Human Medicine, Medical Sciences; Public Health--Allied Medical Sciences
Biosystematic Names: Hominidae--Primates, Mammalia, Vertebrata, Chordata, Animalia

Organisms: human (Hominidae)--patient
Common Taxonomic Terms: Animals; Chordates; Humans; Mammals; Primates; Vertebrates
Diseases: oral cavity cancer
Mesh Terms: Mouth Neoplasms (MeSH)
 Miscellaneous Terms: Concept Codes: cost reduction; diagnosis-related reimbursement scheme;
illness severity; pretreatment patient-mix characteristics; resource allocation
Concept Codes:
37010 Public health - Public health administration and statistics
 12504 Pathology - Diagnostic
 19006 Dental - Pathology
 24004 Neoplasms - Pathology, clinical aspects and systemic effects
 37012 Public health - Health services and medical care
Biosystematic Codes:
86215 Hominidae

Abstract: ...and 1-year follow-up periods for patients with oral cavity cancer (OCC). Another objective
was to identity potential areas for cost reduction and improved **resource allocation** in the **management**
of OCC patients. Using a **retrospective cohort** of 73 patients with OCC, pretreatment patient-mix
characteristics and treatment modalities were evaluated in relation to university-based charges incurred
during the pretreatment evaluation...

15/3,K/3 (Item 2 from file: 155)
DIALOG(R)File 155: MEDLINE(R)

12869186 **PMID:** 9634053
Managing many patients with a urethral stricture: a cost-benefit analysis of treatment options.

Ogbonna B C
Department of Surgery, Jos University Teaching Hospital, Nigeria.
British journal of urology (ENGLAND)   May 1998 , 81 (5) p741-4 , **ISSN:** 0007-1331--Print
Journal Code: 15740090R
Publishing Model Print
Document type: Journal Article; Research Support, Non-U.S. Gov't
Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Managing many patients with a urethral stricture: a cost-benefit analysis of treatment options.

OBJECTIVES: To report a management method in a community where there are many **patients** with
urethral stricture and where the short-term goal of providing some treatment to most may override the
sometimes conflicting long-term aim of minimizing recurrence rates. **PATIENTS** AND METHODS:
Over a 3-**year period**, **using** optical urethrotomy in 76 **patients** followed by intermittent self-dilatation
(ISD) in 29, urethroplasty in 28 and dilatation in three, 92 of 134 **patients** with a urethral stricture were
treated and the outcome compared. RESULTS: The overall recurrence rate was 22%; a combination of
urethrotomy plus ISD had a... ...significantly increased both the time before recurrence and the duration

of follow-up without recurrence after urethrotomy. In addition to providing lasting treatment to many **patients**, urethrotomy was also 10 times cheaper, 10 times faster to perform and offered the surgeon better protection from infection with human immunodeficiency virus than did urethroplasty. CONCLUSION: Because wrongly selecting urethrotomy (resulting in a **failed** procedure) wastes valuable operating **time** and resources, the pre-operative recognition of strictures unsuitable for urethrotomy and their treatment by urethroplasty is important for overall efficiency. (**Descriptors:** ; Adolescent; Adult; Aged; Aged, 80 and over; Child; Cost-Benefit Analysis; Decision Making; Follow-Up Studies; Humans; Medical Audit; Middle Aged; Nigeria; **Prospective** Studies; Recurrence; **Treatment Failure**; Urethral Stricture--economics--EC; Urethral Stricture --etiology--ET; Urinary Catheterization
Named Person:

File 8:Ei Compendex(R) 1884-2009/Jun W3
    (c) 2009 Elsevier Eng. Info. Inc.
File 6:NTIS 1964-2009/Jul W1
    (c) 2009 NTIS, Intl Cpyrght All Rights Res
File 34:SciSearch(R) Cited Ref Sci 1990-2009/Jun W3
    (c) 2009 The Thomson Corp
File 7:Social SciSearch(R) 1972-2009/Jun W3
    (c) 2009 The Thomson Corp
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
    (c) 2006 The Thomson Corp

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Set     Items    Description
S1         75    COHORT()TIME
S2         69    RD  (unique items)
S3         34    S2 NOT PY>2003
S4     483277    (ALLOCAT? OR SPEND? OR APPLY? OR DISTRIBUT? OR WEIGHT? OR DEVOT? OR
 DIVID?()UP OR MANAG? OR BUDGET? OR DECID? OR DECISION?)(3N)(RESOURC? OR CAPITAL OR
 AVAILABLE()MEANS OR COST? ? OR SUPPLY OR SUPPLIES OR MATERIEL OR BUDGET? OR
DEVELOPMENT) OR (VALUE? ?(2W)RISK OR VAR)
S5       6528    (EFFECTIV? OR SUCCESS? OR UTILITY OR USEFUL? OR VALUE OR WORTH? OR
 BENEFI? OR ADVANTAGE? OR GAIN? ?) (4N)(INTERVENTION? OR TREATMENT? OR DIAGNOS? OR
 THERAP? OR HEALTCARE OR SURGER? OR SURGICAL OR DRUG OR PHARMACEUT? OR FIX? OR CURE?
OR  REPAIR? OR REPAR? OR CORRECTION? OR CORRECTIV?)
S6       2369    (UNIT? ? OR MEMBER? ? OR DATAPOINT? OR DATA()POINT? OR ENTITY OR
ENTITIES  OR INDIVIDUAL? ? OR PERSON? ? OR SUBJECT? ? OR PATIENT? ?) (2N)(POPULATION
OR SAMPLE? OR  OBSERVED OR OBSERVATION OR TO()OBSERV? OR TESTING OR TRIAL? OR STUDY
OR STUDIES OR  PATIENTS? ? OR COHORT? ? OR ANALYSIS)
S7      144    (PROSPECTIV? OR RETROSPECTIV? OR TIME? ? OR AFTER OR FOLLOWING OR
SUBSEQUENT()TO OR SINCE OR START?()("FROM" OR WITH))(4N)(DIAGNOS? OR PROGNOS? OR
FAIL? OR DEFECT? OR (CONDITION OR STATUS OR TYPE OR CATEGOR???)(2N)(DEFIN? OR
DETERMIN? OR ASCERTAIN? OR LABEL? OR DESIGNAT? OR  ARRIV?()AT OR ASSIGN?))

S8        192    (PERIOD? ? OR YEAR? ? OR ERA OR ERAS OR HISTOR? OR TIME()(SEGMENT?
OR  RANGE?) OR TIMES OR DURATION OR DURING(2N)TERM OR LONG()(TERM OR RANGE)
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)(4N)(AUTHORIZ?   OR USE OR USAGE OR AVAILABL? OR (IN OR ON OR POST)(2W)(MARKET? OR
CIRCULATION)  OR  PRESCRIBAB? OR MARKETING OR USING OR MARKETPLACE)
S9      514      (DURATION OR TIME? OR PERIOD? OR (AFTER OR
                 "FROM")(2W)(START? OR COMMENC?) OR FOLLOWING OR  SUBSEQUENT()TO OR
SINCE OR PROSPECTIV? OR RETROSPECTIV? OR WINDOW?)(4N)(TREATMENT? OR INTERVENTION?
OR THERAP? OR REPAIR? OR CORRECTION? OR CORRECTIV? OR ADMINIST?)
S10     2510     S6 OR S7 OR S8
S11     2735     S10 OR S9
S12      621     S11(12N)S4
S13      168     S12(7N)S5
S14       84     S13 NOT PY>2003
S15       76     RD  (unique items)
S16        0     (META()ANALY?(12N)HISTOR?)(S)S1
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3/5,K/31 (Item 2 from file: 7)
DIALOG(R)File 7: Social SciSearch(R)

02989709 **Genuine Article#:** VZ990 **Number of References:** 67
Title: Twentieth-century family life cycle and its determinants in the United States
Author(s): ElKhorazaty MN
Corporate Source: RES TRIANGLE INST,ROCKVILLE MARYLAND OFF, POB 12194/RES
TRIANGLE PK//NC/27709 (REPRINT)
Journal: JOURNAL OF FAMILY HISTORY , 1997 , V 22 , N1 , P 70-109
Publisher: SAGE PUBLICATIONS INC , 2455 TELLER RD, THOUSAND OAKS, CA 91320
ISSN: 0363-1990
Language: English **Document Type:** Article
Subfile: CC SOCS--Current Contents, Social & Behavioral Sciences
Journal Subject Category: ANTHROPOLOGY; FAMILY STUDIES

Abstract: Fertility schedules, one of the most important vital statistics, are used to construct a new
period and **cohort time** series macrolevel data set of family life cycle/childbearing and fertility-
inhibiting indices for the United States in the twentieth century. Calculation of these macrolevel indices
on an annual basis is accomplished by the application of recent demographic methodologies, which
require only knowledge of age-specific fertility rates. These annual sets of indices, which otherwise
would require detailed biographical information on the dates of such events, are needed to fully capture
demographic change and to quantitatively ascertain changes in fertility behavior and attitudes and hence,
describe family structure and the timing and speed of child production for better understanding of
American society.
Identifiers-- KeyWord Plus(R): AMERICAN FAMILIES; FERTILITY
Cited References:

Abstract: Fertility schedules, one of the most important vital statistics, are used to construct a new
period and **cohort time** series macrolevel data set of family life cycle/childbearing and fertility-
inhibiting indices for the United States in the twentieth century. Calculation of these macrolevel...
Identifiers--

05909809   **Genuine Article#:** XG075   **Number of References:** 55
Time series analysis supporting the hypothesis that enhanced cosmic radiation during germ cell formation can increase breast cancer mortality in germ cell cohorts

Author: Juckett DA (REPRINT) ; Rosenberg B
Corporate Source: BARROS RES INST,2430 COLL RD/HOLT//MI/48842 (REPRINT); MICHIGAN STATE UNIV,DEPT CHEM/E LANSING//MI/48824
Abstract: Techniques from cancer epidemiology and time series analysis were used to explore the hypothesis that cosmic radiation can induce germ cell changes leading to increases in future breast cancer mortality. A birth **cohort time** series for female breast cancer mortality was obtained using a model-independent, age-period-cohort analysis on age-specific mortality data for 1940-1990. The birth cohort series contained several oscillatory components, which were isolated and compared to the corresponding frequency components of a cosmic ray surrogate time series - Greenland ice-core Be-10 concentrations. A technique, referred to as component wavetrain alignment, was used to show that the breast cancer and cosmic ray oscillations were phase-locked approx. 25 years before the time of birth. This is consistent with the time of germ cell formation, which occurs during the fetal development stage of the preceding generation. Evidence is presented that the observable oscillations in the birth cohort series were residues of oscillations of much larger amplitude in the germ cell cohort, which were attenuated by the effect of the broad maternal age distribution. It is predicted that a minimum of 50% of breast cancer risk is associated with germ cell damage by cosmic radiation (priming event), which leads to the development of individuals with a higher risk of breast cancer. It is proposed that the priming event, by preceding other steps of carcinogenesis, works in concert with risk factor exposure during life. The priming event is consistent with epigenetic changes such as imprinting.
Descriptors--Author Keywords: cosmic rays ; cancer ; time series ; age-period-cohort analysis ; epigenetic
Identifiers-- KeyWord Plus(R): 11-YEAR CYCLE; AGE-PERIOD; TEMPORAL VARIATION; SOLAR-ACTIVITY; UNITED-STATES; HUMAN BIRTHS; FEMALE MICE; OSCILLATIONS; RATES; INFLUENZA
Research Fronts: 95-1802 001 (SOLAR-WIND TERMINATION SHOCK; HELIOSPHERIC RADIO EMISSIONS; GALACTIC COSMIC-RAY MEDIATION; INTERSTELLAR GAS; FLOW DOWNSTREAM)
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Abstract: ...analysis were used to explore the hypothesis that cosmic radiation can induce germ cell changes leading to increases in future breast cancer mortality. A birth **cohort time** series for female breast cancer mortality was obtained using a model-independent, age-period-cohort analysis on age-specific mortality data for 1940-1990. The...
Identifiers--

3/5,K/20 (Item 20 from file: 34)

06818809   **Genuine Article#: ZU623   Number of References: 24**
Evaluation of mortality factors and risk analysis for the design of an integrated pest management system

Author: Roux O (REPRINT) ; Baumgartner J
Corporate Source: SWISS FED OFF AGR,MATTENHOFSTR 5/CH-3003 BERN//SWITZERLAND/ (REPRINT); INT POTATO CTR,/ARIANA 2080//TUNISIA/; INST CTR INSECT PHYSIOL & ECOL,/NAIROBI//KENYA/
Language: English   **Document Type:** ARTICLE
Geographic Location: SWITZERLAND; TUNISIA; KENYA
Subfile: CC AGRI--Current Contents, Agriculture, Biology & Environmental Sciences
Journal Subject Category: ECOLOGY
Abstract: A probabilistic approach of survival analysis based on the theory of competing risks was applied to the potato tuber moth Phthorimaea operculella (Zeller) affecting tubers in Tunisian rustic stores. Exponential curve of death, i.e. constant force of mortality functions were used in a case study on a **cohort time** basis. The additive property of crude cause-specific forces of mortality is used to combine mortality factors, which permits to judge different control strategies. In an integrated pest management perspective, the effect of basic mortalities: i.e innate and dispersal related mortalities is recombined with native natural enemies. Thereafter, we calculate the force of additional comptatible control factors needed to reduce the proportion of infested tubers below an economically relevant level. Control strategies based on native natural enemies are shown to have variable effects which put farmers at economic risks. The general importance of integrating compatible control factors is recognized in the

evaluation of virus applications. Based on risk analyses, Tunisian potato growers were recommended, in the case of standard initial infestations of five eggs per tuber, to use virus preparations at a higher dosage than the 0.0015 larval equivalent/kg as used in this study. Moreover, the study confirms the general importance of entering potatoes with low infestation levels into rustic shelters. This considerably decreases the risk of exceeding the economic threshold and make virus based control efficient even at low dosages. If the initial infestation considerably exceeds five eggs per tuber, the integration of a compatible control factor becomes more difficult. Nevertheless, even in absence of additional control factors the infestation of tubers does not exceed 50%. (C) 1998 Elsevier Science B.V. All rights reserved.

Descriptors--Author Keywords: survival analysis ; hazard rate functions ; competing risks
Identifiers-- KeyWord Plus(R): PHTHORIMAEA-OPERCULELLA ZELLER; POTATO TUBERMOTH; TUNISIA

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  VONARX R, 1990, V35, P151, ENTOMOPHAGA
  VONARX R, 1988, MANAGMENT POTATO TUB

Abstract: ...affecting tubers in Tunisian rustic stores. Exponential curve of death, i.e. constant force of mortality functions were used in a case study on a **cohort time** basis. The additive property of crude cause-specific forces of mortality is used to combine mortality factors, which permits to judge different control strategies. In...
Identifiers--

3/5,K/10 (Item 10 from file: 34)

09930046 **Genuine Article#:** 465NE **Number of References:** 54
Effect of chiropractic intervention on small scoliotic curves in younger subjects: A time-series cohort design

Author: Lantz CA (REPRINT) ; Chen J
Corporate Source: Life Chiropract Coll W,2005 Via Barrett/San Lorenzo//CA/94580 (REPRINT); Life Chiropract Coll W,San Lorenzo//CA/94580; Life Univ,Marietta//GA/; Oregon Hlth Sci Univ,Sch Med,Portland//OR/97201

Abstract: Background: Chiropractors have long claimed to affect scoliotic curves, and case studies abound reporting on successful outcomes. No clinical trials exist, however, that evaluate chiropractic's effectiveness in the management of scoliotic curves.

   Objective: To assess the effectiveness of chiropractic intervention in the management of adolescent idiopathic scoliosts in curves less than 20 degrees

   Design: **Cohort time**-series trial with all subjects electing chiropractic care. Entry-level Cobb angle was compared with postmanagement curve.

   Methods: Forty-two subjects completed the program of chiropractic intervention. Age range at entry was 6 to 12 years, and patients were included if their entry-level x-ray films revealed curves of 6 degrees to 20 degrees. Participants had adjustments performed for 1 year before followup. Full-spine osseous adjustments were the major form of intervention, but heel lifts and postural and lifestyle counseling were used as well.

   Results: There was no discernable effect on the severity of the curves as a function of age, inial curve severity, frequency of care, or attending

   Conclusion: Full-spine chiropractic adjustments with heel lifts and postural and lifestyle counseling are not effective in reducing the severity of scoliotic curves.
Descriptors--Author Keywords: scoliosis ; chiropractic manipulation ; Cobb angle
Identifiers-- KeyWord Plus(R): IDIOPATHIC SCOLIOSIS; ADOLESCENT FEMALE; FUSION
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Abstract: ...of scoliotic curves.

   Objective: To assess the effectiveness of chiropractic intervention in the management of adolescent idiopathic scoliosts in curves less than 20 degrees

   Design: **Cohort time**-series trial with all subjects electing chiropractic care. Entry-level Cobb angle was compared with postmanagement curve.

   Methods: Forty-two subjects completed the program of...
Identifiers--

3/5,K/6 (Item 6 from file: 34)
DIALOG(R)File 34: SciSearch(R) Cited Ref Sci

10977001   Genuine Article#: 591RP   **Number of References:** 15
A single cohort time delay model of the life-cycle of the salmon louse Lepeophtheirus salmonis on Atlantic salmon Salmo salar

Author: Tucker CS; Norman R (REPRINT) ; Shinn AP; Bron JE; Sommerville C; Wootten R
Corporate Source: Univ Stirling,Dept Math & Comp Sci,Stirling FK9 4LA//Scotland/ (REPRINT); Univ Stirling,Dept Math & Comp Sci,Stirling FK9 4LA//Scotland/; Univ Stirling,Inst Aquaculture,Stirling FK9 4LA//Scotland/
Geographic Location: Scotland
Journal Subject Category: FISHERIES; VETERINARY SCIENCES
Abstract: A single **cohort time** delay differential equation model of Lepeophtheirus salmonis population dynamics was developed. The model was parameterised using data from tank infection trials, which followed a single experimental cohort of post-settlement lice through all the developmental stages. This simple mathematical model successfully predicted the timing and numbers of parasites present on the host. However, the death rates of parasitic louse stages within the tank trials were found to be highly variable despite the simplified conditions prevailing within such a system. Embryonic development, free-living nauplius stages and infection parameters were added to this model to allow the complete parasite life-cycle to be described. In addition simulations were carried out to determine the effect upon short-term salmon louse population dynamics of employing a notional chemotherapeutant having an arbitrary instantaneous efficacy of 80%. These results were used to determine the optimal

timing of treatment relative to initial lice counts. This was found to be different for male and female lice stages, reflecting their respective developmental rates.

Descriptors--Author Keywords: Lepeophtheirus salmonis ; epidemiological model ; epidemiology ; population dynamics ; Salmo salar

Identifiers-- KeyWord Plus(R): CALIGIDAE; COPEPODA; SETTLEMENT; SURVIVAL; KROYER; GROWTH

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A single cohort time delay model of the life-cycle of the salmon louse Lepeophtheirus salmonis on Atlantic salmon Salmo salar

Abstract: A single **cohort time** delay differential equation model of Lepeophtheirus salmonis population dynamics was developed. The model was parameterised using data from tank infection trials, which followed a single...
Identifiers--

08251247   **Genuine Article#:** 262VY   **Number of References:** 30
Is carotid endarterectomy cost-effective in symptomatic patients with moderate (50% to 69%) stenosis?

Author: Patel ST; Haser PB; Korn P; Bush HL; Deitch JS; Kent KC (REPRINT)
Corporate Source: CORNELL UNIV,WEILL MED COLL, NEW YORK PRESBYTERIAN HOSP, DIV VASC SURG, 525 E 68TH ST, R/NEW YORK//NY/10021 (REPRINT); CORNELL UNIV,WEILL MED COLL, NEW YORK PRESBYTERIAN HOSP, DIV VASC SURG/NEW YORK//NY/10021

63146-3318
Language: English   **Document Type:** ARTICLE
Geographic Location: USA
Subfile: CC LIFE--Current Contents, Life Sciences; CC CLIN--Current Contents, Clinical Medicine
Journal Subject Category: SURGERY; PERIPHERAL VASCULAR DISEASE

Abstract: Objective: Recently published data from the North American Carotid Endarterectomy Trial revealed a benefit for carotid endarterectomy (CEA) in symptomatic patients with moderate (50% to 69%) carotid stenosis. This benefit was significant but small (absolute stroke risk reduction at 5 years, 6.5%; 22.2% vs 15.7%), and thus, the authors of this study were tentative in the recommendation of operation for these patients. To better elucidate whether CEA in symptomatic **patients** with moderate carotid stenosis is a proper **allocation** of societal **resources**, we examined the cost-**effectiveness** of this **intervention**.

Methods: A decision-analytic Markov process model was constructed to determine the cost-effectiveness of CEA versus medical treatment for a hypothetical cohort: of 66-year-old patients with moderate: carotid stenosis. This model allowed the comparison of not only the immediate hospitalization but also the lifetime costs and benefits of these two strategies. Our measure of outcome was the cost-effectiveness ratio (CER), defined as the incremental lifetime cost per quality-adjusted life year saved. We assumed an operative stroke and death rate of 6.6% and a declining risk of ipsilateral stroke after the ischemic event with medical treatment (first year, 9.3%; second year, 4%; subsequent years, 3%). The hospitalization cost of CEA ($6420) and the annual costs of major stroke ($26,880), minor stroke ($798), and aspirin therapy ($63) were estimated from a hospital cost accounting system and the literature.

Results: CEA for moderate carotid stenosis increased the survival rate by 0.13 quality-adjusted life years as compared with medical treatment at an additional lifetime cost: of $580, Thus, CEA was cost-effective with a CER of $4462. Society is usually willing to pay for interventions with CERs of less than $60,000 leg, CERs for coronary artery bypass grafting at $9100 and for dialysis at $53,000). CEA was not cost-effective if the perioperative risk was greater than 11.3%, if the ipsilateral stroke rate associated with medical treatment at 1 year was reduced to 4.3%, if the age of the patient exceeded 83 years, or if the cost of CEA exceeded $13,200.

Conclusion: CEA in patients with symptomatic moderate carotid stenosis of 50% to 69% is cost-effective. Perioperative: risk of stroke or death, medical and surgical stroke risk, cost of CEA, and age are important determinants of the cost-effectiveness of this intervention.

Identifiers-- KeyWord Plus(R): STROKE; SURGERY; OPERATIONS; COMMUNITY; RISKS

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Abstract: ...7%), and thus, the authors of this study were tentative in the recommendation of operation for these patients. To better elucidate whether CEA in symptomatic **patients** with moderate carotid stenosis is a proper **allocation** of societal **resources**, we examined the cost-**effectiveness** of this **intervention**.

Methods: A decision-analytic Markov process model was constructed to determine the cost-effectiveness of CEA versus medical treatment for a hypothetical cohort: of 66...
Identifiers--

15/5,K/18 (Item 6 from file: 34)

11179389   Genuine Article#: 619VZ   Number of References: 27
Implications of farm-level response to seasonal climate forecasts for aggregate grain production in Zimbabwe

Author: Phillips JG (REPRINT) ; Deane D; Unganai L; Chimeli A
Corporate Source: Bard Coll,Bard Ctr Environm Policy,Annandale on Hudson//NY/12504 (REPRINT); Int Res Inst Climate Predict,Palisades//NY/; Univ London London Sch Econ & Polit Sci,London WC2A 2AE//England/; Zimbabwe Natl Meteorol Serv,Harare//Zimbabwe/

OXFORD OX5 1GB, OXON, ENGLAND
Language: English   **Document Type:** ARTICLE
Geographic Location: USA; England; Zimbabwe
Journal Subject Category: AGRICULTURE, MULTIDISCIPLINARY
Abstract: Seasonal climate forecasts are now being routinely released in Zimbabwe and elsewhere, with the expectation that this information will improve crop and **resource management**. Most studies focus on the household as the **unit** of **analysis**, with **interventions** designed to **benefit** production risk management at the household level. Here we investigate the implications in aggregate of a widespread response to climate forecast information using the case of Zimbabwe in the 1997/1998 El Nino event and the following year's La Nina, assuming that changes in observed area planted in those two seasons can be used as a guide to potential responses to forecast information. Data from the Zimbabwe National Early Warning crop statistics database and household level surveys were used in the analysis. In the 1997/1998 El Nino year, when the official forecast for a poor rainy season was broadly disseminated, decreases in area planted were observed, but in the following year when La Nina conditions and traditional indicators portended higher than average rainfall, area planted per household rose, particularly in the driest zone. Applying observed changes in area planted and crop mix to yields over the preceding 15 seasons, we show that the impact of a forecast of drought conditions can potentially decrease production below that which would result from behavior without a forecast, but production could potentially increase in years when the forecast is for greater than average rainfall. Since production increases in favorable years would be greater in magnitude than the potential decreases in poor rainfall years, long-term mean production could increase in the presence of forecasts. However, production volatility is also shown to increase. We suggest that, if forecast information is widely disseminated and adopted in the future, appropriate market or policy interventions may need to accompany the information to optimize societal benefit of climate forecasts. (C) 2002 Elsevier Science Ltd. All rights reserved.
Identifiers-- KeyWord Plus(R): SOUTHERN OSCILLATION; AGRICULTURE; BENEFITS
Cited References:

15/5,K/23 (Item 11 from file: 34)
DIALOG(R)File 34: SciSearch(R) Cited Ref Sci
(c) 2009 The Thomson Corp. All rights reserved.

10785959   **Genuine Article#:** 570GU   **Number of References:** 28
A retrospective electronic chart review of blood pressure changes in elderly patients treated with amlodipine or an angiotensin-converting enzyme inhibitor or angiotensin II receptor blocker

Author: Dollar A; Brown C; Putnam D; McLaughlin T (REPRINT) ; Okamoto L; Arocho R
Corporate Source: Cardiol Georgia,Atlanta//GA/ (REPRINT); Cardiol Georgia,Atlanta//GA/; Capital Cardiol Assoc,Albany//NY/; NDC Hlth Informat Sci,Phoenix//AZ/; Pfizer Inc,New York//NY/

Abstract: Background: Despite the high **costs** of **managing** hypertension, pharmacologic **intervention** is cost-**effective**, particularly in **patients** at highest risk for cardiovascular events. The prevalence of hypertension in the elderly and the age-associated risks of coronary artery disease and stroke suggest that early identification and aggressive treatment should be priorities in this population.

Objective: The aim of this study was to compare the effect of amlodipine and angiotensin-converting enzyme (ACE) inhibitors and angiotensin II receptor blockers (ARBs) in the treatment of essential hypertension in elderly patients (>60 years) in an actual practice setting.

Methods: This was a retrospective cohort analysis using electronic medical records stored in the Physicians Data Corporation cardiology database. Patients aged >60 years who received care from a cardiologist and who had a recorded diagnosis of hypertension during 1997 or 1998 were identified. For inclusion, patients had to have received an initial prescription for amlodipine, an ACE inhibitor, or an ARB at the index visit. Systolic blood pressure (SBP) and diastolic blood pressure (DBP) readings from the index visit and greater than or equal to1 subsequent visit (<180 days after the index visit) were assessed.

Results: A total of 192 patients (56.3% male; mean age, 71.9 years) met the inclusion criteria. Amlodipine-treated patients experienced a mean decrease in SBP of 26.7 mm Hg, compared with 18.8 mm Hg in patients receiving an ARB and 15.8 mm Ha for patients receiving an ACE inhibitor (P = 0.008, amlodipine vs ACE inhibitor). DBP decreased 8.8 mm Hg with amlodipine, 8.7 mm Hg with an ARB, and 6.2 mm Hg with an ACE inhibitor. After adjusting for age, sex, and disease severity, amlodipine-treated patients were similar to4 times as likely to move to a better blood pressure stage than patients treated with an ARB or an ACE inhibitor (odds ratio, ARB vs amlodipine: 0.245: 95% Cl, 0.080-0.753; odds ratio, ACE inhibitor vs amlodipine: 0.234; 95% Cl, 0.072-0.761).

Conclusion: Results of this study indicate that in patients aged >60 years, amlodipine may be an effective therapy for hypertension.
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Abstract: Background: Despite the high costs of managing hypertension, pharmacologic **intervention** is cost-**effective**, particularly in **patients** at highest risk for cardiovascular events. The prevalence of hypertension in the elderly and the age-associated risks of coronary artery disease and stroke suggest...
Identifiers--

15/5,K/34 (Item 22 from file: 34)

08462182   Genuine Article#: 288CT   Number of References: 18
Cost-effectiveness of second-line treatment with irinotecan or infusional 5-fluorouracil in metastatic colorectal cancer

Author: LevyPiedbois C; DurandZaleski I (REPRINT) ; Juhel H; Schmitt C; Bellanger A ; Piedbois P
Corporate Source: HOP HENRI MONDOR,51 AVE DU MARECHAL DE LATTRE DE TASSIGNY/F-94010 CRETEIL//FRANCE/ (REPRINT); INST GUSTAVE ROUSSY,DEPT PUBL HLTH & INFORMAT/VILLEJUIF//FRANCE/; HOP HENRI MONDOR,APHP, DEPT ONCOL/PARIS//FRANCE/; HOP HENRI MONDOR,APHP, DEPT PUBL HLTH/PARIS//FRANCE/; HOP LA PITIE SALPETRIERE,APHP, DEPT PHARM/PARIS//FRANCE/; ARCOS,/ISSY LES MOULINEAUX//FRANCE/
Language: English   **Document Type:** ARTICLE

Geographic Location: FRANCE
Subfile: CC LIFE--Current Contents, Life Sciences; CC CLIN--Current Contents, Clinical Medicine
Journal Subject Category: ONCOLOGY

Abstract: Background: It has been shown that irinotecan is superior to infusional 5-fluorouracil (5-FU) in patients with advanced colorectal cancer after 5-FU failure. In a recent trial, median survival was 10.8 months for patients treated with irinotecan, compared to 8.5 months in patients receiving infusional 5-FU. Considering the statistically significant but clinically relatively small advantage of irinotecan over 5-FU, cost effectiveness should also be part of treatment decision.

Purpose: To relate the **costs** of each **management** approach to overall survival in **patients** with metastatic colorectal cancer.

Patients and methods: The healthcare costs and medical **benefits** (**treatment**-added survival) of second-line chemotherapy in patients (infusional 5-FU: 129, irinotecan: 127) were compared. Data on overall survival were drawn from a multicenter randomised trial that compared infusional 5-FU (continuous infusion, AIO, or LV5-FU2 regimens) to irinotecan alone. Costs were derived from the accounting system in two university hospitals in Paris, France.

Results: The range in total healthcare costs was 14,135 to 12,192 US$ patient between management approaches, with irinotecan chemotherapy costing most and 5-FU-continuous infusion least. If survival was included as a treatment benefit, the cost-effectiveness ratio of irinotecan over 5-FU ranged from 9,344 to 10,137 US$ per year of added survival.

Conclusions: The least expensive management for metastatic colorectal was 5-FU infusion but the additional cost of irinotecan was balanced by the added months of survival, with a cost-effectiveness ratio close to that of other cancer treatments.

Descriptors--Author Keywords: 5-fluorouracil ; chemotherapy ; colorectal cancer ; cost/effectiveness analysis ; irinotecan
Identifiers-- KeyWord Plus(R): RANDOMIZED TRIAL; FLUOROURACIL; CARCINOMA; ONCOLOGY; BOLUS

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Abstract: ...statistically significant but clinically relatively small advantage of irinotecan over 5-FU, cost effectiveness should also be part of treatment decision.

Purpose: To relate the **costs** of each **management** approach to overall survival in **patients** with metastatic colorectal cancer.

Patients and methods: The healthcare costs and medical **benefits** (**treatment**-added survival) of second-line chemotherapy in patients (infusional 5-FU: 129, irinotecan: 127) were compared. Data on overall survival were drawn from a multicenter...
Identifiers--

15/5,K/45 (Item 33 from file: 34)
DIALOG(R)File 34: SciSearch(R) Cited Ref Sci

07649628 **Genuine Article#:** 191WF **Number of References:** 13
Health-related quality of life and functional outcome following arterial reconstruction for limb salvage

Author: Seabrook GR (REPRINT) ; Cambria RA; Freischlag JA; Towne JB
Corporate Source: MED COLL WISCONSIN,DEPT VASC SURG, DIV VASC SURG, 9200 W WISCONSON AVE/MILWAUKEE//WI/53226 (REPRINT); VET AFFAIRS MED CTR,SURG SERV/MILWAUKEE//WI/
Abstract: Vascular surgery outcomes have traditionally been measured by limb salvage and graft patency. However, as health care resources are rationed, the patient's functional outcome and quality of life will require assessment. The in situ saphenous vein graft has proven successful in achieving long-term limb salvage for patients with critical ischemia, with the expectation of preserving a life-style and sense of well-being that would be lost with limb amputation. This study was conducted to measure functional capacity and quality of life in these patients. Seventy patients with successful in situ saphenous vein bypass grafts constructed for limb-threatening ischemia, followed for a mean of 45.6 months in a surveillance program with normal graft flow characteristics, were compared with a group of age and gender-matched controls with normal limb pressures and no history of vascular occlusive disease, A questionnaire was designed from standardized health status scales and administered to the

two groups to assess symptoms, health perceptions, physical functioning and life quality. When comparing the groups of revascularized and control patients, symptoms and perceptions about their health were similar. However, the revascularized patients had significantly decreased functional capacity in their ability to walk various distances (P less than or equal to 0.005), perform household tasks (P less than or equal to 0.001) and bathe (P less than or equal to 0.001). The patient group with vascular grafts functioned as well as the controls only in activities of dressing and using the toilet, Indicators of life quality that rate independence and mobility, including the ability to procure groceries (P less than or equal to 0.001), prepare meals (P less than or equal to 0.005) participate in social activities (P less than or equal to 0.001) and drive an automobile (P less than or equal to 0.01), were also significantly limited in the patients with successful vascular reconstructions. Although achieving long-term limb salvage and graft patency, the patients in this group of successful vascular reconstructions retain functional disabilities that require significant care. Despite these physical handicaps, these patients have a remarkably similar sense of well-being and lack of somatic complaints compared with the control group, This medical outcome study identifies the functional capacity and lifetime needs for vascular **surgery patients** that will provide **useful** data for those responsible for **allocating** health care **resources**. (C) 1999 The International Society for Cardiovascular Surgery, Published by Elsevier Science Ltd. Ail rights reserved.

Descriptors--Author Keywords: health-related quality of life ; functional outcomes

Identifiers-- KeyWord Plus(R): PRIMARY CARE; PROFILE; QUESTIONNAIRE; RELIABILITY; STANDARDS; REVISION; VALIDITY; IMPACT

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Abstract: ...well-being and lack of somatic complaints compared with the control group, This medical outcome study identifies the functional capacity and lifetime needs for vascular **surgery patients** that will provide **useful** data for those responsible for **allocating** health care **resources**. (C) 1999 The International Society for Cardiovascular Surgery, Published by Elsevier Science Ltd. Ail rights reserved.
Identifiers--

Dialog eLink: USPTO Full Text Retrieval Options

15/5,K/1 (Item 1 from file: 8)
DIALOG(R)File 8: Ei Compendex(R)

0013642039   **E.I. COMPENDEX No:** 1996373250210
Proceedings of the 1995 Goddard Conference on Space Applications of Artificial Intelligence and Emerging Information Technologies

Issue Title: Advanced Space Technologies for Systems Autonomy
Conference Title: Proceedings of the 1995 Goddard Conference on Space Applications of Artificial Intelligence and Emerging Information Technologies
Conference Location: Greenbelt, MD, USA   **Conference Date:** 19950509-19950511
E.I. Conference No.: 44986
Telematics and Informatics (Telematics Inf) 1995 12/3-4 (141-266)
Publication Date: 19951201
Publisher: Pergamon Press Inc
CODEN: TEINE   **ISSN:** 0736-5853
Item Identifier (DOI): 10.1016/0736-5853(95)00015-1
Document Type: Conference Review; Conference Proceeding   **Record Type:** Abstract
Treatment: A; (Applications); T; (Theoretical)
Language: English   **Summary Language:** English
The proceedings contains 8 papers. Topics discussed include genetic algorithms for satellite **resource allocation**, satellite-based instrument, real-**time value**-driven **diagnosis,** knowledge representation system, communication satellite constellations, fuzzy logic techniques, automated agent and ground control limits in autonomous spacecraft.
Descriptors: Communication satellites; Docking; Fuzzy sets; Genetic algorithms; Geostationary satellites; Knowledge representation; Mathematical models; Monitoring; Real time systems; Resource allocation; Space applications; Space rendezvous; *Telecommunication
Identifiers: Autonomous spacecraft; EiRev; Multi-agent systems; Orbital satellite; Satellite based instrument; Satellite resource allocation
Classification Codes:
655.2.1 (Communication Satellites)
722.4 (Digital Computers & Systems)
723.4 (Artificial Intelligence)
921.6 (Numerical Methods)
656 (Space Flight)
716 (Electronic Equipment, Radar, Radio & Television)
The proceedings contains 8 papers. Topics discussed include genetic algorithms for satellite **resource allocation**, satellite-based instrument, real-**time value**-driven **diagnosis,** knowledge representation system, communication satellite constellations, fuzzy logic techniques, automated agent and ground control limits in autonomous spacecraft.
Descriptors:

15/5,K/2 (Item 2 from file: 8)
DIALOG(R)File 8: Ei Compendex(R)

0013568506   **E.I. COMPENDEX No:** 1996193102988

Scoping software projects

Sulgrove, Robert N.
 Corresp. Author/Affil: Sulgrove, Robert N.

 The key to risk management is to be as complete as possible in identifying project risks. This paper discusses the project-scoping process, which is being successfully used by software developers at AT&T Global Information Solutions. Project scoping is a method or process used for identifying and assessing risks to determine a project's feasibility. Lists of requirement categories and risk factors are provided as facilitating tools. Project scoping provides a basis for defining a less risky project and for redefining or discontinuing projects that are too risky. The project-scoping process also provides a basis for continuously monitoring risks during development to detect emerging problems at the earliest possible moment - while there is still **time** to take **effective corrective** action. Thus, project **management** can focus on **development** problems in addition to tracking schedule compliance. The bottom line is that by implementing project scoping, management has better control over a project.

 Descriptors: Monitoring; Production control; Project management; Risk assessment; Scheduling; Strategic planning; *Software engineering
 Identifiers: Project feasibility; Project scoping process; Risk management; Schedule compliance
 Classification Codes:
 723.5 (Computer Applications)
 912.2 (Management)
 913.1 (Production Engineering)
 914.1 (Accidents & Accident Prevention)

 ...scoping process also provides a basis for continuously monitoring risks during development to detect emerging problems at the earliest possible moment - while there is still **time** to take **effective corrective** action. Thus, project **management** can focus on **development** problems in addition to tracking schedule compliance. The bottom line is that by implementing project scoping, management has better control over a project.
 Descriptors:

0013124003 **E.I. COMPENDEX No:** 1994031185675
Cost benefit analysis of a complex system with correlated failures and repairs

Goel, L.R.; Gupta, Rakesh; Tyagi, P.K.

Corresp. Author/Affil: Goel, L.R.: Meerut Univ, Meerut, India
Document Type: Article; Journal   **Record Type:** Abstract
Treatment: A; (Applications); T; (Theoretical)
Language: English   **Summary Language:** English
Number of References: 4

This paper studies the cost benefit analysis of a complex system consisting of two subsystems, say A and B, connected in series. Subsystem A consists of two identical units, whereas subsystem B has only one unit. The system operates if one of the two units of subsystem A and the subsystem B are operative. Assuming a bivariate exponential density for the joint distribution of failure and repair times of the units, some reliability characteristics useful to system managers have been obtained. Explicit results have also been obtained for the case when failure and repair times are uncorrelated.
Descriptors: Correlation methods; Costs; Failure analysis; Probability; Repair; Systems analysis; *Reliability theory
Identifiers: Bivariate exponential **distribution**; Cost benefit analysis; **Repair time**
Classification Codes:
911.1 (Cost Accounting)
913.5 (Maintenance)
922.1 (Probability Theory)
922.2 (Mathematical Statistics)
Identifiers: Bivariate exponential **distribution**; Cost benefit analysis; **Repair time**

15/5,K/9 (Item 4 from file: 6)
DIALOG(R)File 6: NTIS

2006903   **NTIS Accession Number:** AD-A323 680/9
Cost Offsets for Alcoholism, Drug Abuse, and Mental Health Treatment

Miro, R. J.
Library of Congress, Washington, DC. Federal Research Div.
Corporate Source Codes: 000975039; 415168

Sep 94   35p
Language: English

Country of Publication: United States

This research paper reviews and analyzes the scholarly literature on cost offsets for alcoholism, drug abuse, and mental health (ADM) treatment. Two dimensions of cost offsets are considered: (1) cost offsets resulting from reduced medical utilization following timely and appropriate ADM intervention, more precisely defined as a medical offset; and (2) cost offsets resulting from long term reductions in overall health care expenditures, including the costs of ADM treatment; the latter is a total or absolute offset that may generate cost effectiveness. This paper is divided into an introduction and three major sections on cost offsets for alcoholism, mental health, and drug abuse treatment. Because of space limitations, only the most comprehensive available studies are discussed. An effort has been made to incorporate as broad and representative a sample of findings as possible, mainly by summarizing the results of previous research reviews. A variety of sources were used in the preparation of this report, including published reports and articles, books, and unpublished papers; many of which were retrieved from the collections of the National Library of Medicine, as well as from the general collections of the Library of Congress. Valuable source materials were also provided by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Descriptors: *Cost analysis; *Mental health; *Alcoholism; *Drug addiction; Cost **effectiveness**; **Patients**; Health care facilities; **Intervention**; Planning programming **budgeting**; Detoxification; Drug users; Psychotherapy; Counseling; Mental disorders; Drug withdrawal; Group therapy

Identifiers: Health insurance; NTISDODXA

Section Headings: 96GE (Business and Economics--General); 92B (Behavior and Society--Psychology); 57T (Medicine and Biology--Psychiatry)

Descriptors: *Cost analysis; *Mental health; *Alcoholism; *Drug addiction; Cost **effectiveness**; **Patients**; Health care facilities; **Intervention**; Planning programming **budgeting**; Detoxification; Drug users; Psychotherapy; Counseling; Mental disorders; Drug withdrawal; Group therapy

Identifiers:

V. Additional Resources Searched

No additional results of relevance found in the additional databases identified in the cover correspondence.